cellulose, hydroxypropyl cellulose, hydroxypropyl-ethyl cellulose, hydroxypropyl-methyl cellulose, sodium carboxymethyl cellulose, cellulose acetate, sodium alginate, polymaleic anhydride esters, polyortho esters, polyethyleneimine, polyethylene glycol, methoxypolyethylene glycol, ethoxypolyethylene glycol, polyethylene oxide, poly(1,3 bis(p-carboxyphenoxy) propane-co-sebacic anhydride, N, N-diethylaminoacetate, block copolymers of polyoxyethylene and polyoxypropylene. The microspheres are coated with a (d,1 lactide-glycolide) copolymer. The coating makes the microspheres more resistant to enzymatic degradation. CAS INDEXING IS AVAILABLE FOR THIS PATENT. . . to entrap other growth hormones in a polymer matrix, e.g. estrogens, androgens, insulin, IGF, interleukin-I and interleukin-II. Cytokins such as interferon-. beta.and interferon-.gamma., used in the treatment of diseases such as osteoporosis, diabetes mellitus and multiple sclerosis may also benefit from the present invention. => d his (FILE 'HOME' ENTERED AT 16:02:18 ON 20 MAY 1998) FILE 'USPATFULL, EMBASE, MEDLINE, CAPLUS, WPIDS' ENTERED AT 16:05:21 ON 20 MAY 1998 279237 S BONE DISORDER OR (PAGET? DISEASE) OR RICKET? OR OSTEO? 156370 S INTERFERON? OR INTERFERON INDUCER 1977 S L1 AND L2 536 S L1 (10A) L2 108 S L4 (10A) TREAT? 2 S L5 (10A) INTERFERON BETA 2 DUP REM L6 (0 DUPLICATES REMOVED) 97646 S (MAMMARY ORLUNG OR PROSTATE OR THYROID OR RENAL OR COLO 0 S L8 (10A) L5 0 S L8 AND L5 130 S L8 AND L3 124 DUP REM L11 (6 DUPLICATES REMOVED) 43 S L12 AND (INTERFERON BETA OR IFN?) 19 S L12 AND INTERFERON BETA => d 114 1-19 bib abs kwic L14 ANSWER 1 OF 19 USPATFULL 1998:51204 USPATFULL Immunotherapeutic stress protein-peptide complexes against cancer Srivastava, Pramod K., Riverdale, NY, United States Mount Sinai School of Medicine Of The City University of New York, New York, NY, United States (U.S. corporation) US 5750119 980512 US 94-315892 940930 (8) Continuation-in-part of Ser. No. US 94-180685, filed on 13 Jan 1994 Utility

```
IN
PA
PΙ
ΑI
RLI
DТ
EXNAM Primary Examiner: Feisee, Lila; Assistant Examiner: Bansal, Geetha
       Pennie & Edmonds LLP
LREP
CLMN
       Number of Claims: 48
```

Exemplary Claim: 1,2 ECL No Drawings DRWN

LN.CNT 1097

L1L2

L3

L4

L5

Lб

ь7 Г8

L9

L10 L11

L12L13

L14

ΑN ТT

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

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Disclosed is a method for inhibiting the proliferation of a tumor
AB
       in a mammal. The method involves the steps of (a) isolating a
       stress protein-peptide complex from tumor cells previously removed
       from the mammal and (b) administering the isolated stress
       protein-peptide complex back to the mammal in order to stimulate
       in the mammal an immune response against the tumor from which the
       complex was isolated. Stress protein-peptide complexes having
       particular utility in the practice of the instant invention
       include the Hsp70-peptide, Hsp90-peptide and gp96-peptide
       complexes.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
SUMM
             . interleukin-3 (IL-3), interleukin-4 (IL-4), interleukin-5
       (IL-5), interleukin-6 (IL-6), interleukin-7 (IL-7), interleukin-8
       (IL-8), interleukin-9 (IL-9), interleukin-10 (IL-10),
       interleukin-11 (IL-11), interleukin-12 (IL-12), interferon
       .alpha. (IFN.alpha.), interferon .beta.
       (IFN.beta.), interferon .gamma. (IFN.gamma.), tumor
       necrosis factor .alpha. (TNF.varies.), tumor necrosis factor
       .beta. (TNF.beta.), granulocyte colony stimulating factor (G-CSF),
       granulocyte/macrophage colony stimulating.
          . . treatment of a variety of tumors, for example, tumors
SUMM
       that are mesenchymal in origin (sarcomas) i.e., fibrosarcomas;
       myxosarcomas; liposarcomas; chondrosarcomas; osteogenic
       sarcomas; angiosarcomas; endotheliosarcomas; lymphangiosarcomas;
       synoviosarcomas; mesotheliosarcomas; Ewing's tumors; myelogenous
       leukemias; monocytic leukemias; malignant lymphomas; lymphocytic
       leukemias; plasmacytomas; leiomyosarcomas and rhabdomyosarcoma.
SUMM
             . interleukin-3 (IL-3), interleukin-4 (IL-4), interleukin-5
       (IL-5), interleukin-6 (IL-6), interleukin-7 (IL-7), interleukin-8
       (IL-8), interleukin-9 (IL-9), interleukin-10 (IL-10),
       interleukin-11 (IL-11), interleukin-12 (IL-12), interferon
       .alpha. (IFN.alpha.), interferon .alpha. (IFN.beta.),
     interferon .gamma. (IFN.gamma.), tumor necrosis factor a
       (TNF.varies.), tumor necrosis factor .beta. (TNF.beta.),
       granulocyte colony stimulating factor (G-CSF),
       granulocyte/macrophage colony stimulating.
CLM
       What is claimed is:
       22. The method of claim 1, 3, 4, 5, 7, or 8 wherein the
     tumor is a renal cell carcinoma.
       28. The method of claim 9 or 10 wherein the tumor is a
     renal cell carcinoma.
L14 ANSWER 2 OF 19 USPATFULL
ΑN
       1998:36350 USPATFULL
ΤI
       Flow cytometric pharmacosensitivity assay and method of cancer
       treatment
IN
       Medenica, Rajko D., One Ocean Point, Port Royal Plantation, Hilton
       Head Island, SC, United States 29928
       Powell, David K., 95 Headlands Dr., Hilton Head Island, SC, United
       States 29926
       US 5736129 980407
PΙ
ΑI
       US 95-559812 951117 (8)
DT
       Utility
EXNAM Primary Examiner: Walsh, Stephen; Assistant Examiner: Pak, Michael
LREP
       DeWitt Ross & Stevens SC
CLMN
       Number of Claims: 14
ECL
       Exemplary Claim: 1
DRWN
       No Drawings
LN.CNT 2750
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
AΒ
       A method of treating cancer by the use of a multidrug
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chemotherapeutic regimen determined by in vitro pharmacosensitivity tests. A cell suspension is prepared from a tumor specimen obtained from the patient. The viable tumor cell count within the cell suspension is calculated. The volume of the cell suspension is then adjusted to obtain a base cell concentration by diluting the cell suspension with patient medium in proportion with the viable tumor cell count. A sample of the cell suspension is retained as a negative control sample. Drug samples are then prepared, each drug sample containing a mixture of cell suspension, patient medium, and a drug selected from several drugs, wherein each drug sample contains a different drug which is added to the drug sample in an aliquot amount proportional to the base cell concentration. The drug samples and negative control sample are then incubated. After incubation, the drug samples and negative control sample are stained with a DNA intercalating dye. The cell viability in the drug samples and negative control sample is determined by use of a flow cytometer. The cell viability in the drug samples and negative control sample is compared to determine the pharmacosensitivity of the tumor. A multidrug treatment regimen is then administered to the patient, wherein the regimen includes the drugs shown to be most effective against the tumor in the pharmacosensitivity assay. The treatment has been shown to be especially useful in the simultaneous treatment of primary tumors and their metastases, especially when the chemotherapeutic regimen is administered locoregionally by intra-arterial infusion methods.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

- SUMM Other researchers have similarly investigated the effects of certain biological response modifiers, e.g., interferons, on apoptosis. Dao et al. (1994); Thoth et al. (1992); Fluckiger et al. (1994).
- SUMM . . . and lower levels of tumor growth factors such as insulin-like growth factor I. Perhaps the best-known biological response modifiers are interferons, a family of over 50 closely related glycoproteins with antiviral, immunoregulatory and antiproliferative functions. The immunoregulatory functions of
 - interferons, such as the enhancement of natural killer
 lymphocyte activity, the increase in histocompatibility antigens,
 the activation of monocytes/macrophages, and B. . . proven to
 be of clinical importance, for example, in protecting bone marrow
 from the toxicity of chemotherapy. As an example,
 - interferon alpha (IFN.alpha.) has been found to result in a considerable percentage of clinical remission alone or in combination with other. . .
- SUMM nHuIFN.alpha. (natural human leukocyte interferon alpha), by Virogen A. G. (Basel, Switzerland);
- SUMM nHuIFN.alpha.n-3 (natural human leukocyte interferon alpha n-3), by Purdue Frederick Co. under the trademark "ALFERON" (Norwalk, Conn. 06856);
- SUMM nHuIFN.beta. (natural human interferon beta or natural human fibroblastic interferon), by Virogen Labs., Basel, Switzerland;
- SUMM rIFN.alpha.-2a (recombinant interferon alpha-2a), by
 Roche Laboratories, a division of Hoffman-LaRoche Inc. (Nutley,
 N.J. 07110) under the trademark "ROFERON-A";
- SUMM rIFN.alpha.-2b (recombinant interferon alpha-2b), by Schering Corp. (Kenilworth, N.J. 07033) under the trademark "INTRON-B";
- SUMM rIFN.beta.-1b (recombinant interferon beta-1b or fiblaferon), by Berlex Labs. (Richmond, Calif. 94804) under the trademark "BETASERON";
- SUMM rIFN.tau.-1b (recombinant interferon gamma-1b or polyferon), by Genentech, Inc. (San Francisco, Calif. 94080) under the trademark "ACTIMMUNE";

```
nHuIFN.pi.-(natural human interferon pi, or antitumor
SUMM
       specific interferon), the subject of copending U.S.
       patent application 07/179,529;
         . . the breast, head, neck, lung, cervix, penis, prostate,
 SUMM
       testis, and bladder; acute lymphocytic leukemia; meningeal
       leukemia; non-Hodgkin's lymphoma; mycosis fungoides;
     osteosarcoma; and trophoblastic tumors.
       . . doxorubicin is an antitumor antibiotic commonly used for
SUMM
       treating bladder, breast, head, neck, liver, lung, ovarian,
       prostatic, stomach, testicular and thyroid
     cancer, as well as Hodgkin's disease, leukemia, Wilm's
       tumor, lymphomas and sarcomas.
       . . of the colon, rectum, breast, ovarian, cervix, bladder,
SUMM
       stomach, liver and pancreas, 5-FU has synergistic interaction with
       other antineoplastic agents, interferons, and
       irradiation and is thus commonly used in combination therapy.
          . . N.J. 08560): an immunomodulator/immunopotentiator;
SUMM
       commonly used in combination with 5-FU after surgical resection in
       Dukes' stage C (tumor-node-metastasis stage III) colon
     cancer.
SUMM
            . or liquid form. Examples of the tumors which have been
       treated or tested by use of the invention are: bladder
     cancer; breast cancer; colon
       carcinoma; non-small cell lung cancer; pancreatic cancer; liver
       cancer (metastases); prostatic carcinoma; acute myeloid leukemia;
       chronic myelogenous leukemia; chronic lymphocytic leukemia;
       hepatocellular carcinoma; glioblastoma; non-Hodgkin's lymphoma;
       melanoma; osteogenic sarcoma; ovarian carcinoma;
       pleomorphic adenocarcinoma; and Waldenstrom's macroglobulinemia.
       All have responded to treatment with the procedure. It is expected
SUMM
         . . response modifier drugs plus one or two biological
       response modifiers. Treatments wherein four non-biological
       response modifier drugs plus an alpha interferon (and
       occasionally an additional biological response modifier, generally
       a hormone) have been tested with excellent results, some of which
       Experiment 24: Patient (24) suffered from osteogenic
DETD
       sarcoma. A tumor sample was tested by the preferred embodiment of
       the pharmacosensitivity assay as set out above and the.
         . . the assay, 5 of these being biological response
DETD
       modifiers. All 78 patients' tumors demonstrated sensitivity to
       doxorubicin, mito-C, cisplatin and interferon alpha
       (IFN.alpha.). Patients with the following tumors also demonstrated
       sensitivity to the following drugs: carboplatin for ovarian and
       lung cancer; floxuridine for colon
     cancer; methotrexate for breast and salivary gland cancer;
       dacarbazine for melanoma; etoposide for renal cell and primary
       liver cancer; and bleomycin.
DETD
            . Drug sensitivity to the same drugs varied considerably
       amongst the patients. The four most active drugs for each patient,
       plus interferon alpha (IFN.alpha.) were administered to
       each patient, and each drug was administered at the highest
       recommended dosage. Systemic chemotherapy was.
DETD
            . with 30 drugs (including 6 biological response modifiers
       and 3 hormones). Doxorubicin, methotrexate, floxuridine,
       streptozotocin, BCNU, mito-C, cis-platinum, carboplatin, and
     interferons alpha and gamma (IFN.alpha. and IFN.tau.) were
       found to have activity in the pharmacosensitivity assay. A
      percutaneously introduced intra-arterial, intra-hepatic.
      Experiment 32: 21 patients suffering from colon
     cancer with liver metastases were treated by the procedure
       (average age 61, from 35-75 years of age, 8 females, 13 males)..
       . . tumor cells with 26 drugs (5 of which were biological
```

response modifiers). Doxorubicin, methotrexate, fluoruracil,

```
floxuridine, BCNU, ara-C, streptozotocin and interferon
       alpha (IFN.alpha.) were found to have good activity against the
     colon cancer cells. The 5 most active drugs for
       each patient and interferon alpha were administered once
       every 4 weeks for 6 weeks by intra-arterial, intra-hepatic
       catheter, and also by general systemic administration.
DETD
          . . and thrombocytopenia) were observed and were reversible.
       The experiment showed that the procedure offers an effective
       choice of drugs for colon cancer with liver
       metastases with minimal side-effects.
DETD
          . . artery immediately after placement of the catheter and
       before chemotherapy. Liver tumor cells demonstrated sensitivity to
       doxorubicin, mito-C, cisplatin and interferon alpha in
       the pharmacosensitivity assay and were used for all 86 patients.
       Two additional drugs (as per patient tumor response).
       Dao et al., "Natural human interferon-augments apoptosis
DETD
       in activated T-cell line," Cellular Immunology, v155: 304-311
       (1994).
       Thoth et al., "Type I interferon resistance in a
DETD
       colorectal cancer cell line is associated with a more aggressive
       phenotype in vivo," British Journal of Cancer,.
CLM
       What is claimed is:
       14. The method of claim 1 wherein in step (i) an alpha
     interferon and a hormone are administered.
L14 ANSWER 3 OF 19 USPATFULL
       1998:7097 USPATFULL
AN
TI
      Antitumor agent
IN
      Arai, Shigeyuki, Okayama, Japan
       Nishizaki, Yasushi, Okayama, Japan
       Kimoto, Tetsuo, Okayama, Japan
       Kurimoto, Masashi, Okayama, Japan
PA
      Kabushiki Kaisha Hayashibara Seibutsu Kagaku Kenkyujo, Okayama,
       Japan (non-U.S. corporation)
      US 5710179 980120
PΙ
      US 96-675059 960703 (8)
AΙ
      JP 95-191015 950405
PRAI
      Utility
EXNAM Primary Examiner: Goldberg, Jerome D.
     Browdy and Neimark
CLMN
      Number of Claims: 3
ECL
      Exemplary Claim: 1
DRWN
      No Drawings
LN.CNT 469
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
      An antitumor agent comprising as an effective ingredient
      3-[4-hydroxy-3,5-bis(3-methyl-2-butenyl)phenyl]-2-propenoic acid
      obtained from propolis and/or its physiologically acceptable
      salt(s). The agent exerts a strong antitumor activity without
      substantially inducing side effects.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
         . . its salt(s), as well as compositions with one or more
      carries, excipients, diluents, stabilizers, and biologically
      active substances such as interferon-.alpha.,
    interferon-.beta., interferon-.gamma.,
      interleukin-2, interleukin-12, TNF-.alpha., TNF-.beta.,
      cyclophosphamide, adriamycin, .alpha.-difluoromethylornithine,
      melphalan, 5-fluorouracil, doxorubicin, chlorambucil, vinblastine,
      1,3-bis(2-chloroethy1)-1-nitrosourea, cisplatin, levamisole,
      D-penicillamine, gold compounds, BCG, KRESTIN.RTM..
SUMM
      The present antitumor agent exerts a strong antitumor activity on
      human malignant tumors, for example, solid tumors such
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as colon cancer, rectum cancer,

```
lingual cancer, bladder cancer, choriocarcinoma, cancer of
       liver, uterine cancer, prostatic cancer, pharyngeal cancer, lung
       cancer, breast cancer, malignant melanoma, Kaposi sarcoma, brain
       tumor, neuroblastoma, ovarian tumor, testicular tumor,
     osteosarcoma, pancreatic cancer, renal
       carcinoma, hypernephroma, and angioendothelioma; and hematopoietic
       malignant tumors such as leukemia and lymphoma.
SUMM
                                               . 0.85)
                           100 (42.8)
(ATCC HB 8065).
HeLa cell (uterine cancer)
                0.54 \cdot +- \cdot \cdot 0.06 \cdot (1.36 \cdot +- \cdot \cdot 0.61)
                           100 (100)
(ATCC CCL 2)
RPMI 4788 cell (colon cancer)
                0.21 .+-. 0.03 (2.95 .+-. 1.36)
                           100 (71.4)
(FERM BP-2429)
WiDr cell (rectum cancer)
                0.36 .+-. 0.02 (1.83 .+-. 0.85)
                           100 (85.7)
(ATCC CCL 218)
KB cell (rhinopharynx cancer)
                0.54 .+-. 0.03 (2.12 .+-. 0.96)
                           100 (42.8)
(ATCC CCL 17)
Hep-2 cell (thyroid gland cancer)
                0.81 .+-. 0.65 (2.16 .+-. 1.31)
                           100 (42.8)
(ATCC CCL 23)
G-361 cell (malignant melanoma)
                0.36 .+-. 0.02 (1.96 .+-. 0.98)
                           100. .
SUMM
            . only a relatively low dose on human malignant tumors such
       as human lung cancer, gastric cancer, cancer of liver, uterine
     cancer, colon cancer, rectum
     cancer, rhinopharynx cancer, thyroid
       gland cancer, malignant melanoma, leukemia, and
       lymphoma, and attained a desired percentage surviving on the 35th
       day after the transplantation of human.
         . . be selectively used as a therapeutic agent for human
DETD
       malignant tumors including gastric cancer, lung cancer, cancer of
       liver, uterine cancer, breast cancer,
     colon cancer, rectum cancer, and
       malignant melanoma.
         . . be selectively used as a therapeutic agent for human
DETD
       malignant tumors including gastric cancer, lung cancer, cancer of
       liver, uterine cancer, breast cancer,
     colon cancer, rectum cancer, and
       malignant melanoma.
       . . . be selectively used as a therapeutic agent for human
DETD
      malignant tumors including gastric cancer, lung cancer, cancer of
       liver, uterine cancer, breast cancer,
     colon cancer, rectum cancer, and
       malignant melanoma.
DETD
         . . be selectively used as a therapeutic agent for human
       malignant tumors including gastric cancer, lung cancer, cancer of
       liver, uterine cancer, breast cancer,
     colon cancer, rectum cancer, and
       malignant melanoma.
       These suppositories can be advantageously used as a therapeutic
DETD
       agent for human malignant tumors including colon
       and rectum cancers.
       What is claimed is:
CLM
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Gastric cancer, thyroid gland cancer

cancer, lingual cancer, bladder cancer, choriocarcinoma, cancer of liver, uterine cancer, prostatic cancer, pharyngeal cancer, lung cancer, breast cancer, malignant melanoma, Kaposi sarcoma, brain tumor, neuroblastoma, ovarian tumor, testicular tumor, osteosarcoma, pancreatic cancer, renal carcinoma, hupernephroma, angioendothelioma, leukemia and lymphoma. ANSWER 4 OF 19 USPATFULL 1998:7055 USPATFULL Use of a melanoma differentiation associated gene (mda 7) for reversing a cancerous phenotype Fisher, Paul B., Scarsdale, NY, United States The Trustees of Columbia University in the City of New York, New York, NY, United States (U.S. corporation) US 5710137 980120 US 96-696573 960816 (8) Utility Primary Examiner: Marschel, Ardin H. White, John P.; Chan, Albert Wai-Kit Number of Claims: 16 Exemplary Claim: 1 DRWN 5 Drawing Figure(s); 4 Drawing Page(s) LN.CNT 775 CAS INDEXING IS AVAILABLE FOR THIS PATENT. This invention provides a method for reversing the cancerous phenotype of a cancer cell by introducing a nucleic acid having the melanoma differentiation associated gene (mda-7) into the cell under conditions that permit the expression of the gene so as to thereby reverse the cancerous phenotype of the cell. This invention also provides a method for reversing the cancerous phenotype of a cancer cell by introducing the gene product of the above-described gene into the cancerous cell so as to thereby reverse the cancerous phenotype of the cell. This invention also provides a pharmaceutical composition having an amount of a nucleic acid having the melanoma differentiation associated gene (mda-7) or the gene product of a melanoma differentiation associated gene (mda-7) effective to reverse the cancerous phenotype of a cancer cell and a pharmaceutically acceptable carrier. CAS INDEXING IS AVAILABLE FOR THIS PATENT. . . . 14). This experimental strategy has been applied to human melanoma cells, induced to terminally differentiate by treatment with recombinant human interferon .beta. (IFN-.beta.) and mezerein (MEZ), resulting in the cloning of novel melanoma differentiation-associated (mda) genes not previously described in DNA data. . defects in growth control, and tumor cells often display abnormal patterns of cellular differentiation. The combination of recombinant human fibroblast interferon and the antileukemic agent mezerein corrects these abnormalities in cultured human melanoma cells resulting in irreversible growth arrest and terminal. . . . human cell types including HBL-100 (normal mammary epithelial), H0-1 and C8161 (melanoma), GBM-18 and T98G (glioblastoma multiforme) and Saos-2 (human osteosarcoma) were maintained under similar conditions. Early passage normal human mammary epithelial cells (HMEC; passages 10-12) were

. member selected from the group consisting of sodium, potassium, calcium, magnesium and ammonium salts of 3-[4-hydroxy-3,5-bis(3methyl-2-butenyl)phenyl]-2-propenoic acid, said human malignant

tumors being colon cancer, rectum cancer, gastric cancer, thyroid gland

ΑN

ΤI

IN

PΑ

PΙ

ΑI

DT

ECL

DETD

DETD

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DETD
                          . .+-. 12
T98G (Glioblastoma)
            99 .+-. 9 32 .+-. 4(3.6)
                                  115 .+-. 14
            126 .+-. 22
Saos-2
                      35 .+-. 6(3.9)
                                  138 .+-. 14
(Osteosarcoma)
Rat embryo fibroblast
            60 .+-. 10
                      35 .+-. 5(1.7)
                                  66 .+-. 7
(normal rat embryo)
CREF-ras
          147 .+-. 16
                      25 .+-. 4(6.0)
                                  151.
DETD
         . . carcinoma (LS174T and SW480), nasopharyngeal carcinoma
       (HONE-1), prostate carcinoma (DU-145), melanoma (H0-1 and C8161),
       glioblastoma multiforme (GBM-18 and T98G) and osteosarcoma
       (Saos-2). As observed with HeLa cells, the average sizes of
       Hyg.sup.R colonies that form after transfection with mda-7 (S)
       constructs.
DETD
       To confirm the suppressive effect of mda-7 on cell growth, DU-145
       human prostate cancer cells were engineered to
       express a DEX-inducible mda-7 gene. When DU-145 cl 6 or cl 7 cells
       [containing a DEX-inducible. . . 10.sup.-6 M DEX (data not
       shown). These data indicate that ectopic expression of mda-7 can
       directly alter cell growth in prostate cancer
       cells.
               of mda-7 into the DU-145 human prostate carcinoma cell
DETD
       line that contains a mutated RB gene (38) and Saos-2 human
     osteosarcoma cells that do not express RB (or wild-type
       p53) results in an inhibition in colony formation (Table 1).
       Similarly, induction.
L14 ANSWER 5 OF 19 USPATFULL
AN
       1998:4744 USPATFULL
TI
       Thioether conjugates
ΙN
       Willner, David, Hamden, CT, United States
       Trail, Pamela A., Farmington, CT, United States
       King, H. Dalton, Hamden, CT, United States
      Hofstead, Sandra J., Middletown, CT, United States
       Greenfield, Robert S., Wallingford, CT, United States
       Braslawsky, Gary R., Glastonbury, CT, United States
       Bristol-Myers Squibb Company, Princeton, NJ, United States (U.S.
PΑ
       corporation)
      US 5708146
                  980113
PΙ
      US 95-469840 950606 (8)
ΑI
       Division of Ser. No. US 92-824951, filed on 23 Jan 1992, now
RLI
       patented, Pat. No. US 5622929
\mathsf{DT}
       Utility
      Primary Examiner: Peselev, Elli
EXNAM
       Poor, Brian; Sorrentino, Joseph M.; Savitsky, Thomas R.
LREP
CLMN
      Number of Claims: 13
ECL
       Exemplary Claim: 1
       18 Drawing Figure(s); 17 Drawing Page(s)
DRWN
LN.CNT 2044
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Provided are drug/ligand compounds of Formula (I): ##STR1## (I) in
       which
       D is a drug moiety;
       n is an integer from 1 to 10;
```

obtained from Clonetics Corporation. .

```
Y is O or NH.sub.2.sup.+ C1.sup.-;
       z is 0 or 1;
       q is about 1 to about 10;
       X is a ligand; and,
       A is a Michael Addition Adduct.
       In a preferred embodiment, the ligand is an immunoglobulin,
       preferably a chimeric antibody or fragment thereof. Also provided
       are formulations comprising as an active ingredient a compound of
       Formula (I), intermediates useful for preparing the compounds of
       Formula (I), processes for preparing the compounds of Formula (I),
       and methods for using the compounds of the invention.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       FIG. 13 provides in vivo cytotoxic activity data for Adriamycin
       conjugates of relaxed Chimeric BR96 against RCA Human
     Colon Tumors.
DETD
          . . example, a toxin such as abrin, ricin A, pseudomonas
       exotoxin, or diphtheria toxin; a protein such as tumor necrosis
       factor, .alpha.-interferon, .beta.-
     interferon, nerve growth factor, platelet derived growth
       factor, tissue plasminogen activator; or, biological response
       modifiers such as, for example, lymphokines, interleukin-1.
DETD
               Lung
         G1, LuCa2,
                  Kyoizumi et al., Cancer Res., 45:3274
         LuCa3, LuCa4
                  1985.
Small Cell Lung
                  Okabe et al., Cancer Res. 45:1930,
         TFS-2
Cancer
Colon Cancer
         11.285.14
                  G. Rowland, et al., Cancer Immunol.
         14.95.55 Immunother., 19:1, 1985
         NS-3a-22, NS-10
                  Z. Steplewski, et al., Cancer Res.,
         NS-19-9, NS-33a
                  41:2723,. . . 91/00295, published January 10, 1991.
Breast Cancer
         B6.2, B72.3
                  D. Colcher, et al., in Monoclonal
                  Antibodies and Cancer, loc. cit.
                  p. 121.
Osteogenic Sarcoma
         791T/48, M. J. Embleton, ibid, p. 181
         791T/36
Leukemia CALL 2
                  C. T. Teng, et al., Lancet, 1:01,
         anti-idiotype
         Invest.,
                  68:1331, 1981.
Prostrate Cancer
                  J. J. Starling, et al., in Monoclonal
         Turp-27 Antibodies and Cancer, loc. cit.,
                  p. 253
Renal Cancer
```

p is an integer from 1 to 6;

DETD For animals bearing the RCA. colon tumor, therapy was initiated 15 days after tumor implant when the median tumor size was 75 mm.sup.3. The average TVDT for. . .

DETD TABLE

Summary of Antitumor Activity of ChiBR96-ADM Thioether Conjugates Evaluated Against Established RCA Human Colon Tumor Xenografts

> Dose (mg/kg).sup.a Log Cell

> > % Tumor Regressions No. of

Conjugate ADM

ChiBR96

Route

Kill PR CR Cures

Mice

ChiBR96-ADM-7.88

10 350.

DETD In summary, the ChiBR96-ADM conjugate demonstrated antigen-specific antitumor activity in the RCA human colon tumor model. Cures and complete regressions of established RCA tumors were observed following the administration of ChiBR96-ADM conjugate at doses of. . .

L14 ANSWER 6 OF 19 USPATFULL

AN 97:122847 USPATFULL

TI Treatment for biological damage using a colony stimulating factor and a biological modifier

IN Zimmerman, Robert, Lafayette, CA, United States
Marafino, Jr., Benedict J., San Francisco, CA, United States

PA Chiron Corporation, Emeryville, CA, United States (U.S. corporation)

PI US 5702697 971230

AI US 95-457629 950601 (8)

RLI Continuation of Ser. No. US 94-289844, filed on 12 Aug 1994, now patented, Pat. No. US 5508031 which is a continuation of Ser. No. US 93-49070, filed on 16 Apr 1993, now abandoned which is a continuation of Ser. No. US 90-626975, filed on 12 Dec 1990, now abandoned which is a division of Ser. No. US 89-399386, filed on 25 Aug 1989, now patented, Pat. No. US 4985241 which is a continuation of Ser. No. US 87-113643, filed on 26 Oct 1987, now abandoned which is a continuation-in-part of Ser. No. US 86-933475, filed on 21 Nov 1986, now abandoned

DT Utility

EXNAM Primary Examiner: Ulm, John; Assistant Examiner: Mertz, Prema LREP Gass, David A.; Savereide, Paul B.; Blackburn, Robert P.

CLMN Number of Claims: 32 ECL Exemplary Claim: 1

DRWN No Drawings

LN.CNT 1705

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB Damage to cells, tissue and other body parts in a mammalian host may be treated by using a colony stimulating factor in conjunction with at least one biological modifier, which may be a free radical scavenger or a metabolic inhibitor. The biological modifier is preferably uric acid, buthionine sulphoximine, vitamin C, aspirin, or nordihydroguaiaretic acid. Such a combination may be used to

treat, for example, cancer, infectious diseases, and damage caused by radiation therapy, high oxygen tension, and chemotherapy.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

```
Lymphokines and cytotoxins, such as interleukin-2,
     interferon-alpha, interferon-gamma, colony
       stimulating factor, and tumor necrosis factor, are proteins
       secreted by T cells and/or microphages upon activation by antigens
       Interferons (IFN) constitute a group of naturally
SUMM
       occurring proteins which are known to exhibit anti-viral,
       anti-tumor and immunoregulatory behavior. Two types. . .
       have been identified based on differences in their observed
       biological properties and molecular structures: Type I and Type
       II. Beta-interferon (IFN-.beta.) is a Type I IFN which
       can be induced in fibroblasts by viral challenge and contains
       about 165 amino.
         . . Kreuzes)) or with augmentation of natural killer activity
SUMM
       (Svedersky et al., J. Immunol. (1984), 133:714-718 and Shalaby et
       al., J. Interferon Res. (1985), 5:571-581). In addition,
       U.S. Statutory Invention Reg. No. H22, published Feb. 4, 1986 to
       Creasey et al., discloses. . . in combination therapy of
       certain breast cancer and myeloma cell lines using synergistically
       effective amounts of 5-fluorouracil and human recombinant beta-
     interferon. Furthermore, enhanced anti-tumor activity has
      been observed using IFN-.gamma. in combination with TNF and
       chemotherapeutic agents. Svedersky et al., Internl.. .
          . . foreign agents such as pathogens in the cell. Examples of
SUMM
       such lymphokines and cytotoxins include, but are not limited to,
     interferons (e.g., interferon-alpha,
       (IFN-.alpha.), interferon-beta, (IFN-.beta.),
       and interferon-gamma, (IFN-.alpha.)), interleukins
       (e.g., interleukin-1 (IL-1), interleukin-2 (IL-2), interleukin-3
       (IL-3), and interleukin-4 (IL-4)), tumor necrosis factor-alpha
       (TNF-.alpha.), tumor necrosis factor-beta (TNF-.beta.).
       inhibitory activity factor (MIF), macrophage-activating factor
       (MAF), NK cell activating factor, T cell replacing factor,
       leukocyte-inhibitory factor (LIF), other lymphotoxins,
     osteoclast-activating factor (OAF), soluble immune
       response suppressor (SIRS), growth-stimulating factor, a monocyte
      growth factor, etc. Preferably, the lymphokine or cytotoxin is an
       interleukin (more preferably IL-2), an interferon (more
      preferably IFN-.beta.), TNF-.alpha. or -.beta., or a colony
       stimulating factor (more preferably CSF-1). The most preferred
      herein is TNF-.alpha..
         . . term "cancer" as used in the above definition refers to
SUMM
      any neoplastic disorder, including such cellular disorders as, for
      example, renal cell cancer, Kaposi's sarcoma,
      chronic leukemia, breast cancer, sarcoma, ovarian carcinoma,
       rectal cancer, throat cancer, melanoma, colon
     cancer, bladder cancer, mastocytoma, lung cancer
      and gastrointestinal or stomach cancer. Preferably, the
     cancer is colon cancer, melanoma,
     renal cell cancer, sarcoma, lung cancer,
      adenocarcinoma, or breast cancer.
SUMM
      The typical dosage level of interferon (especially
      INF-.beta.) in humans ranges from about 100 units to one billion
      units/m.sup.2. Preferably, IFN-.beta. is administered to humans
       . . anti-tumor effect in animals and humans. The preclinical
DETD
       response of TNF alone correlated with a clinical response of TNF
      to colon cancer.
DETD
                            Correlate
With TNF Resistance In Vivo
```

.mu.M Total

% Tumor Growth

Tumor Line 10.sup.6 cells Inhibition.sup.a

```
PAN-D2 (mouse
                              0
             484 .+-. 90
tumor)
HT29 (human colon
             308 .+-. 131
tumor)
P815 (mouse tumor)
             305 .+-. 197
                             20
P388 (mouse tumor)
             280 .+-. 150
                             1.5
B-16 (mouse tumor)
             180 .+-..
L14 ANSWER 7 OF 19 USPATFULL
       97:89066 USPATFULL
ΑN
       Purification of human myelomonocyte interferon gamma
ΤI
       with an immobilized antibody
       Kurimoto, Masashi, Okayama, Japan
IN
      Mitsuhashi, Masakazu, Okayama, Japan
       Kabushiki Kaisha Hayashibara Seibutsu Kagaku Kenkyujo, Okayama,
PΑ
       Japan (non-U.S. corporation)
ΡI
       US 5672692 970930
       US 96-625369 960401 (8)
ΑI
       Division of Ser. No. US 95-476040, filed on 7 Jun 1995, now
RLI
       patented, Pat. No. US 5554515 which is a division of Ser. No. US
       94-336224, filed on 7 Nov 1994, now patented, Pat. No. US 5518899
      which is a division of Ser. No. US 93-62323, filed on 17 May 1993,
       now patented, Pat. No. US 5362490 which is a continuation of Ser.
      No. US 91-658740, filed on 22 Feb 1991, now abandoned which is a
       continuation-in-part of Ser. No. US 87-78005, filed on 21 Jul
       1987, now abandoned And Ser. No. US 89-379318, filed on 13 Jul
       1989, now abandoned
      JP 86-176266 860725
PRAI
      JP 87-125777 870525
       JP 88-184069 880723
DT
      Utility
      Primary Examiner: Naff, David M.
EXNAM
LREP
      Browdy and Neimark
CLMN
      Number of Claims: 5
ECL
      Exemplary Claim: 1
       2 Drawing Figure(s); 2 Drawing Page(s)
DRWN
LN.CNT 1153
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
      A human myelomonocyte interferon-gamma having a novel
      polypeptide and carbohydrate chain structure is produced by
       propagation of an established human myelomonocyte in vitro or
       after being implanted in a non-human warm-blooded animal or in a
       diffusion chamber placed inside or outside the body of the animal.
       The human myelomonocyte may be contacted with an inducer during
       propagation. A monoclonal antibody specific to the human
      myelomonocyte interferon-gamma is produced by immunizing
       a non-human warm-blooded animal with purified human myelomonocyte
     interferon-gamma as an antigen, recovering an antibody
       producing cell from the animal and fusing the cell with a myeloma
       cell to produce a hybrid capable of producing the monoclonal
       antibody. The human myelomonocyte interferon-gamma can
       be purified by chromatography with an immobilized anti-human
       myelomonocyte interferon-gamma antibody such as the
       monoclonal antibody. The human myelomonocyte interferon
       -gamma can be used as a prophylactic and therapeutic agent for
       human interferon-gamma susceptive diseases.
```

```
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Purification of human myelomonocyte interferon gamma
       with an immobilized antibody
AB
      A human myelomonocyte interferon-gamma having a novel
       polypeptide and carbohydrate chain structure is produced by
       propagation of an established human myelomonocyte in vitro or.
          animal. The human myelomonocyte may be contacted with an
       inducer during propagation. A monoclonal antibody specific to the
       human myelomonocyte interferon-gamma is produced by
       immunizing a non-human warm-blooded animal with purified human
       myelomonocyte interferon-gamma as an antigen, recovering
       an antibody producing cell from the animal and fusing the cell
       with a myeloma cell to produce a hybrid capable of producing the
       monoclonal antibody. The human myelomonocyte interferon
       -gamma can be purified by chromatography with an immobilized
       anti-human myelomonocyte interferon-gamma antibody such
       as the monoclonal antibody. The human myelomonocyte
     interferon-gamma can be used as a prophylactic and
       therapeutic agent for human interferon-gamma susceptive
       diseases.
      The present invention relates to a novel human myelomonocyte
SUMM
     interferon-gamma, a process to prepare said
     interferon-gamma, and its use.
      More particularly, the present invention relates to a novel human
      myelomonocyte interferon-gamma, and a process for
       preparing said interferon-gamma, characterized by
       allowing an established human myelomonocyte capable of producing
       myelomonocyte interferon-gamma to produce said
     interferon-gamma, and recovering the accumulation; a
       process to prepare a monoclonal anti-interferon-gamma
       antibody using the same; and a method for purifying said
     interferon-gamma using the monoclonal antibody, as well as
       to a prophylactic and therapeutic agent for interferon
       -gamma susceptive disease containing the human myelomonocyte
     interferon-gamma as an effective ingredient.
      As described in Shigeyasu Kobayashi, "Interferon"
       published by Kodansha Co., Ltd., Tokyo, Japan (1975), D. A. J.
       Tyrrell, "Interferon and its Clinical Potential",
       published by William Heinemann Medical Books Ltd., London (1976),
       and Protein, Nucleic Acid and Enzyme, Vol.21, No.4, pp.245-333
       (1976), interferon is a name to designate glycoproteins
       that are extracellularly inducible in viable cell by subjecting it
       to the action of an interferon inducer, for
       example, virus, bacterium, protozoon, rickettsia,
       nucleic acid, endotoxin and polysaccharide, as well as having an
       activity of nonspecifically inhibiting viral growth.
      This activity has rendered interferons since the
SUMM
      discovery a potential prophylactic and therapeutic agent for vital
       diseases. Recent studies revealed that interferons exert
       an antioncotic activity on vital tumors, as well as on nonviral
       tumors. Because of the activity, the development of
       pharmaceuticals using interferons is in great
       expectation.
SUMM
       Interferons include interferon-alpha (or
       leukocyte interferon), interferon-beta
       (or fibroblast interferon), and interferon
       -gamma (or immune interferon). Preparation of
     interferon-alpha and interferon-beta
       has been established by using leukocyte and fibroblast cell.
       Recently, pharmaceuticals incorporated with these
     interferons have been commercialized.
      Respective interferon will hereinafter be abbreviated as
       "IFN-alpha", "IFN-beta" and "IFN-gamma" occasionally with the
       prefix "Hu" representing human origin.
```

. . . DETD . . . as epidemic conjunctivitis, herpetic keratitis, influenza, rubella, serum hepatitis, and acquired immune deficiency syndrome (AIDS); and nonviral diseases including malignant tumors such as colon carcinoma, lung carcinoma, liver carcinoma and osteosarcoma, and immunopathies including atopic allergy, myoasthenia, collagenosis, pernicious anemia, articular rheumatism, and systemic lupus erythematosus.

DETD . . . and therapeutic agent for vital disease such as those in small and large intestines, as well as that for malignant tumors such as colon carcinoma and liver carcinoma, and immunopathies such as atopic allergy, pernicious

carcinoma, and immunopathies such as atopic allergy, pernicious anemia, articular rheumatism, and systemic lupus erythematosus.

CLM What is claimed is:

- 1. A method for purifying a human myelomonocyte interferon -gamma, comprising: propagating an established human myelomonocyte which produces human myelomonocyte interferon-gamma; and recovering the human myelomonocyte interferon-gamma by column chromatography using an antibody specific to human myelomonocyte interferon-gamma.
- 2. The method of claim 1, wherein said established human myelomonocyte is obtained by: implanting an established human myelomonocyte capable of producing human myelomonocyte interferon-gamma in a non-human warm-blooded animal, or inoculating the established human myelomonocyte in a diffusion chamber placed inside or outside the. 3. The method of claim 1, wherein said antibody specific to human myelomonocyte interferon-gamma is obtained by: propagating an established human myelomonocyte which produces myelomonocyte interferon-gamma; recovering and purifying the interferon-gamma produced by said human myelomonocyte; immunizing a non-human warm-blooded animal using the recovered and purified human myelomonocyte interferon -gamma as an antigen; recovering an antibody producing cell from the animal; fusing said antibody producing cell with a myeloma cell. . . hybrid cells; selecting from said hybrid cells a hybrid cell capable of producing a monoclonal antibody specific to human myelomonocyte interferon-gamma; and culturing the hybrid cell to produce said monoclonal antibody specific to human

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L14 ANSWER 8 OF 19 USPATFULL
```

myelomonocyte interferon-gamma.

AN 97:83609 USPATFULL

TI Treatment for biological damage using tumor necrosis factor and a free-radical scavenger

IN Zimmerman, Robert, Lafayette, CA, United States
Marafino, Jr., Benedict J., San Francisco, CA, United States
PA Chiron Corporation, Emeryville, CA, United States (U.S.

corporation)

PI US 5667776 970916

AI US 95-456947 950601 (8)

Continuation of Ser. No. US 94-289844, filed on 12 Aug 1994, now patented, Pat. No. US 5508031 which is a continuation of Ser. No. US 93-49070, filed on 16 Apr 1993, now abandoned which is a continuation of Ser. No. US 90-626975, filed on 12 Dec 1990, now abandoned which is a division of Ser. No. US 89-399386, filed on 25 Aug 1989, now patented, Pat. No. US 4985241 which is a continuation of Ser. No. US 87-113643, filed on 26 Oct 1987, now abandoned which is a continuation-in-part of Ser. No. US 86-933475, filed on 21 Nov 1986, now abandoned

DT Utility

EXNAM Primary Examiner: Ulm, John; Assistant Examiner: Mertz, Prema LREP Gass, David A.; Savereide, Paul B.; Blackburn, Robert P.

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ECL
        Exemplary Claim: 1
DRWN
        No Drawings
LN.CNT 1648
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
        Damage to cells, tissue and other body parts in a mammalian host
        may be treated by using a tumor necrosis factor in conjunction
        with at least one biological modifier, which may be a free radical
        scavenger or a metabolic inhibitor. The biological modifier is
       preferably uric acid, buthionine sulphoximine, vitamin C, aspirin,
        or nordihydroguaiaretic acid. Such a combination may be used to
        treat, for example, cancer, infectious diseases, and damage caused
       by radiation therapy, high oxygen tension, and chemotherapy.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
SUMM
       Lymphokines and cytotoxins, such as interleukin-2,
     interferon-alpha, interferon-gamma, colony
       stimulating factor, and tumor necrosis factor, are proteins
       secreted by T cells and/or macrophages upon activation by antigens
       or.
SUMM
       Interferons (IFN) constitute a group of naturally
       occurring proteins which are known to exhibit anti-viral,
       anti-tumor and immunoregulatory behavior. Two types. . .
       have been identified based on differences in their observed
       biological properties and molecular structures: Type I and Type
       II. Beta-interferon (IFN-.beta.) is a Type I IFN which
       can be induced in fibroblasts by viral challenge and contains
       about 165 amino.
SUMM
       . . Kreuzes)) or with augmentation of natural killer activity
       (Svedersky et al., J. Immunol. (1984), 133:714-718 and Shalaby et
       al., J. Interferon Res. (1985), 5:571-581). In addition,
       U.S. Statutory Invention Reg. No. H22, published Feb. 4, 1986 to
       Creasey et al., discloses. . . in combination therapy of
       certain breast cancer and myeloma cell lines using synergistically
       effective amounts of 5-fluorouracil and human recombinant beta-
     interferon. Furthermore, enhanced anti-tumor activity has
       been observed using IFN-.gamma. in combination with TNF and
       chemotherapeutic agents. Svedersky et al., Internl.. .
DETD
                foreign agents such as pathogens in the cell. Examples of
       such lymphokines and cytotoxins include, but are not limited to,
     interferons (e.g., interferon-alpha,
       (IFN-.alpha.), interferon-beta, (IFN-.beta.),
       and interferon-gamma, (IFN-.alpha.)), interleukins
(e.g., interleukin-1 (IL-1), interleukin-2 (IL-2), interleukin-3
       (IL-3), and interleukin-4 (IL-4)), tumor necrosis factor-alpha
       (TNF-.alpha.), tumor necrosis factor-beta (TNF-.beta.).
       inhibitory activity factor (MIF), macrophage-activating factor
       (MAF), NK cell activating factor, T cell replacing factor,
       leukocyte-inhibitory factor (LIF), other lymphotoxins,
     osteoclast-activating factor (OAF), soluble immune
       response suppressor (SIRS), growth-stimulating factor, a monocyte growth factor, etc. Preferably, the lymphokine or cytotoxin is an
       interleukin (more preferably IL-2), an interferon (more
       preferably IFN-.beta.), TNF-.alpha. or -.beta., or a colony
       stimulating factor (more preferably CSF-1). The most preferred
       herein is TNF-.alpha..
DETD
       . . term "cancer" as used in the above definition refers to
       any neoplastic disorder, including such cellular disorders as, for
       example, renal cell cancer, Kaposi's sarcoma,
       chronic leukemia, breast cancer, sarcoma, ovarian carcinoma,
       rectal cancer, throat cancer, melanoma, colon
     cancer, bladder cancer, mastocytoma, lung cancer
       and gastrointestinal or stomach cancer. Preferably, the
```

CLMN

Number of Claims: 30

cancer is colon cancer, melanoma,

renal cell cancer, sarcoma, lung cancer,

```
adenocarcinoma, or breast cancer.
       The typical dosage level of interferon (especially
DETD
       INF-.beta.) in humans ranges from about 100 units to one billion
       units/m.sup.2. Preferably, IFN-.beta. is administered to humans
       . . . anti-tumor effect in animals and humans. The preclinical
DETD
       response of TNF alone correlated with a clinical response of TNF
       to colon cancer.
                              Correlate
DETD
With TNF Resistance In Vivo
             .mu.M Total
             Glutathione Equivalents
                             % Tumor Growth
             /10.sup.6 cells Inhibition.sup.a
Tumor Line
PAN-02 (mouse
             484 .+-. 90
                              0
tumor)
HT29 (human colon
             308 .+-. 131
tumor)
P815 (mouse tumor)
             305 .+-. 197
                             20
P388 (mouse tumor)
             280 .+-. 150
B-16 (mouse tumor)
             180 .+-.. .
L14 ANSWER 9 OF 19 USPATFULL
       97:33724 USPATFULL
AN
       Thioether conjugates
TI
       Willner, David, Hamden, CT, United States
IN
       Trail, Pamela A., Farmington, CT, United States
       King, H. Dalton, Hamden, CT, United States
       Hofstead, Sandra J., Middletown, CT, United States
       Greenfield, Robert S., Wallingford, CT, United States
       Braslawsky, Gary R., Glastonbury, CT, United States
       Bristol-Myers Squibb Company, New York, NY, United States (U.S.
PΑ
       corporation)
       US 5622929 970422
ΡI
       US 92-824951 920123 (7)
ΑI
       Utility
      Primary Examiner: Peselev, Elli
EXNAM
       Bristol-Myers Squibb Co.
LREP
CLMN
       Number of Claims: 52
ECL
       Exemplary Claim: 6
       18 Drawing Figure(s); 17 Drawing Page(s)
DRWN
LN.CNT 2212
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Provided are drug/ligand compounds of Formula (I): ##STR1## in
       which D is a drug moiety;
       n is an integer from 1 to 10;
       p is an integer from 1 to 6;
       Y is O or NH.sub.2.sup.+ Cl.sup.-;
       z is 0 or 1;
       g is about 1 to about 10;
       X is a ligand; and,
```

A is a Michael Addition Adduct.

```
In a preferred embodiment, the ligand is an immunoglobulin, preferably a chimeric antibody or fragment thereof. Also provided are formulations comprising as an active ingredient a compound of Formula (I), intermediates useful for preparing the compounds of Formula (I), processes for preparing the compounds of Formula (I), and methods for using the compounds of the invention.
```

```
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
DRWD
       FIG. 13 provides in vivo cytotoxic activity data for Adriamycin
       conjugates of relaxed Chimeric BR96 against RCA Human
     Colon Tumors.
DETD
       . . . example, a toxin such as abrin, ricin A, pseudomonas
       exotoxin, or diphtheria toxin; a protein such as tumor necrosis
       factor, .alpha.-interferon, .beta.-
     interferon, nerve growth factor, platelet derived growth
       factor, tissue plasminogen activator; or, biological response
       modifiers such as, for example, lymphokines, interleukin-1.
DETD
          . . G1, LuCa2, Kyoizumi et al., Cancer Res.,
          LuCa3,
                      45:3274 1985.
          LuCa4
Small Cell
          TFS-2
                     Okabe et al., Cancer Res.
Lung Cancer
                      45:1930, 1985.
Colon Cancer
          11.285.14 G. Rowland, et al., Cancer
          14.95.55
                     Immunol. Immunother., 19:1,
                     1985
          NS - 3a - 22,
                     Z. Steplewski, et al., Cancer
                     Res., 41:2723,. . . 91/00295, published
          NS-10
                     January 10, 1991.
Breast Cancer
          B6.2, B72.3
                     D. Colcher, et al., in Monoclonal
                     Antibodies and Cancer, loc. cit.
                     p. 121.
Osteogenic
          791T/48,
                     M. J. Embleton, ibid, p. 181
Sarcoma
          791T/36
Leukemia CALL 2
                     C. T. Teng, et al., Lancet, 1:01,
                     1982
          anti-idiotype
                     R.. . . Clin. Invest., 68:1331, 1981.
Prostrate D83.21, P6.2,
                     J. J. Starling, et al., in
Cancer
          Turp-27
                     Monoclonal Antibodies and
                     Cancer, loc. cit., p. 253
Renal Cancer
          A6H, D5D
                     P. H. Lange, et al., Surgery,
```

98:143, 1985.

DETD For animals bearing the RCA colon tumor, therapy was initiated 15 days after tumor implant when the median tumor size was 75 mm.sup.3. The average TVDT for. . . DETD TABLE V

Summary of Antitumor Activity of ChiBR96-ADM Thioether Conjugates Evaluated

Against Established RCA Human Colon Tumor Xenografts

Dose Lo

% Tumor No.

(mg/kg).sup.a

ADM ChiBR96

Conjugate

Route

Kill

PR CR Cures
Mice

```
ChiBR96-ADM-7.88
      In summary, the ChiBR96-ADM conjugate demonstrated
DETD
      antigen-specific antitumor activity in the RCA human colon
    tumor model. Cures and complete regressions of established
      RCA tumors were observed following the administration of
      ChiBR96-ADM conjugate at doses of.
L14 ANSWER 10 OF 19 USPATFULL
      97:16169 USPATFULL
ΑN
      Thioether conjugates
ΤI
      Willner, David, Hamden, CT, United States
IN
      Trail, Pamela A., Farmington, CT, United States
      King, H. Dalton, Hamden, CT, United States
      Hofstead, Sandra J., Middletown, CT, United States
      Greenfield, Robert S., Wallingford, CT, United States
      Braslawsky, Gary R., Glastonbury, CT, United States
      Bristol-Myers Squibb Company, New York, NY, United States (U.S.
PA
      corporation)
PΙ
      US 5606017 970225
      US 95-468162 950606 (8)
ΑI
      Division of Ser. No. US 92-824951, filed on 23 Jan 1992
RLI
      Utility
      Primary Examiner: Peselev, Elli
EXNAM
      Number of Claims: 20
      Exemplary Claim: 1
       18 Drawing Figure(s); 17 Drawing Page(s)
DRWN
LN.CNT 2095
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
      Provided are drug/ligand compounds of Formula (I): ##STR1## in
AΒ
      which D is a drug moiety;
      n is an integer from 1 to 10;
      p is an integer from 1 to 6;
      Y is O or NH.sub.2.sup.+ Cl.sup.-;
       z is 0 or 1;
       q is about 1 to about 10;
      X is a ligand; and,
      A is a Michael Addition Adduct.
```

In a preferred embodiment, the ligand is an immunoglobulin, preferably a chimeric antibody or fragment thereof. Also provided are formulations comprising as an active ingredient a compound of Formula (I), intermediates useful for preparing the compounds of Formula (I), processes for preparing the compounds of Formula (I), and methods for using the compounds of the invention.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DRWD FIG. 13 provides in vivo cytotoxic activity data for Adriamycin conjugates of relaxed Chimeric BR96 against RCA Human

```
Colon Tumors.
DETD
       . . . example, a toxin such as abrin, ricin A, pseudomonas
       exotoxin, or diphtheria toxin; a protein such as tumor necrosis
       factor, .alpha.-interferon, .beta.-
     interferon, nerve growth factor, platelet derived growth
       factor, tissue plasminogen activator; or, biological response
       modifiers such as, for example, lymphokines, interleukin-1.
DETD
         . . Lung
          G1, LuCa2,
                   Kyoizumi et al., Cancer Res., 45:3274
          LuCa3, LuCa4
                   1985.
Small Cell Lung
          TFS-2
                   Okabe et al., Cancer Res. 45:1930,
cancer
                   1985.
Colon Cancer
          11.285.14
                   G. Rowland, et al., Cancer Immunol.
          14.95.55 Immunother., 19:1, 1985
          NS-3a-22, NS-10
                   Z. Steplewski, et al., Cancer Res.,
          NS-19-9,. . . 91/00295, published January 10, 1991.
Breast Cancer
          B6.2, B72.3
                   D. Colcher, et al., in Monoclonal
                   Antibodies and Cancer, loc. cit.
                   p. 121.
Osteogenic Sarcoma
          791T/48, M. J. Embleton, ibid, p. 181
          791T/36
Leukemia CALL 2
                   C. T. Teng, et al., Lancet, 1:01,
                   1982
          anti-idiotype
         Invest.,
                   68:1331, 1981.
Prostrate Cancer
          D83.21, P6.2,
                   J. J. Starling, et al., in Monoclonal
          Turp-27
                   Antibodies and Cancer, loc. cit.,
                   p. 253
Renal Cancer
          A6H, DSD P. H. Lange, et al., Surgery, 98:143,
                   1985.
DETD
       For animals bearing the RCA colon tumor,
       therapy was initiated 15 days after tumor implant when the median
       tumor size was 75 mm.sup.3. The average TVDT for.
DETD
                                         TABLE V
Summary of Antitumor Activity of ChiBR96-ADM Thioether
Conjugates Evaluated Against Established RCA Human Colon
Tumor Xenografts
          Dose
                           % Tumor No.
          (mg/kg).sup.a Cell
                           Regressions
Conjugate ADM ChiBR96
                    Route
                        Kill
                           PR CR Cure
```

Mice

ChiBR96-ADM-7.88 DETD In summary, the ChiBR96-ADM conjugate demonstrated antiqen-specific antitumor activity in the RCA human colon tumor model. Cures and complete regressions of established RCA tumors were observed following the administration of ChiBR96-ADM conjugate at doses of. L14 ANSWER 11 OF 19 USPATFULL 96:82590 USPATFULL AΝ Preparation of a monoclonal antibody specific to human TΙ myelomonocyte interferon-gamma IN Kurimoto, Masashi, Okayama, Japan Mitsuhashi, Masakazu, Okayama, Japan Kabushiki Kaisha Hayashibara Seibutsu Kagaku Kenkyujo, Okayama, PΑ Japan (non-U.S. corporation) US 5554515 960910 PT ΑI US 95-476040 950607 (8) Division of Ser. No. US 94-336224, filed on 7 Nov 1994 which is a RLI division of Ser. No. US 93-62323, filed on 17 May 1993, now patented, Pat. No. US 5362490 which is a continuation of Ser. No. US 91-658740, filed on 22 Feb 1991, now abandoned which is a continuation-in-part of Ser. No. US 87-78005, filed on 21 Jul 1987, now abandoned And a continuation-in-part of Ser. No. US 89-379318, filed on 13 Jul 1989, now abandoned JP 86-176266 860725 PRAI JP 87-125777 870525 JP 88-184069 880723 DTUtility EXNAM Primary Examiner: Naff, David M. Browdy and Neimark Number of Claims: 5 CLMN ECL Exemplary Claim: 1 2 Drawing Figure(s); 2 Drawing Page(s) LN.CNT 1141 CAS INDEXING IS AVAILABLE FOR THIS PATENT. A human myelomonocyte interferon-gamma having a novel polypeptide and carbohydrate chain structure is produced by propagation of an established human myelomonocyte in vitro or after being implanted in a non-human warm-blooded animal or in a diffusion chamber placed inside or outside the body of the animal. The human myelomonocyte may be contacted with an inducer during propagation. A monoclonal antibody specific to the human myelomonocyte interferon-gamma is produced by immunizing a non-human warm-blooded animal with purified human myelomonocyte interferon-gamma as an antigen, recovering an antibody producing cell from the animal and fusing the cell with a myeloma cell to produce a hybrid capable of producing the monoclonal antibody. The human myelomonocyte interferon-gamma can be purified by chromatography with an anti-human myelomonocyte interferon-gamma antibody such as the monoclonal antibody. The human myelomonocyte interferon-gamma can be used as a prophylactic and therapeutic agent for human interferon -gamma susceptive diseases. CAS INDEXING IS AVAILABLE FOR THIS PATENT. Preparation of a monoclonal antibody specific to human TImyelomonocyte interferon-gamma A human myelomonocyte interferon-gamma having a novel AΒ polypeptide and carbohydrate chain structure is produced by propagation of an established human myelomonocyte in vitro or.

. animal. The human myelomonocyte may be contacted with an inducer during propagation. A monoclonal antibody specific to the

human myelomonocyte interferon-gamma is produced by

```
immunizing a non-human warm-blooded animal with purified human
       myelomonocyte interferon-gamma as an antigen, recovering
       an antibody producing cell from the animal and fusing the cell
       with a myeloma cell to produce a hybrid capable of producing the
       monoclonal antibody. The human myelomonocyte interferon
       -gamma can be purified by chromatography with an anti-human
       myelomonocyte interferon-gamma antibody such as the
       monoclonal antibody. The human myelomonocyte interferon
       -gamma can be used as a prophylactic and therapeutic agent for
       human interferon-gamma susceptive diseases.
SUMM
       The present invention relates to a novel human myelomonocyte
     interferon-gamma, a process to prepare said
     interferon-gamma, and its use.
SUMM
       More particularly, the present invention relates to a novel human
       myelomonocyte interferon-gamma, and a process for
       preparing said interferon-gamma, characterized by
       allowing an established human myelomonocyte capable of producing
       myelomonocyte interferon-gamma to produce said
     interferon-gamma, and recovering the accumulation; a
       process to prepare a monoclonal anti-interferon-gamma
       antibody using the same; and a method for purifying said
     interferon-gamma using the monoclonal antibody, as well as
       to a prophylactic and therapeutic agent for interferon
       -gamma susceptive disease containing the human myelomonocyte
     interferon-gamma as an effective ingredient.
       As described in Shigeyasu Kobayashi, "Interferon",
SUMM
       published by Kodansha Co., Ltd., Tokyo, Japan (1975), D. A. J.
       Tyrrell, "Interferon and its Clinical Potential",
       published by William Heinemann Medical Books Ltd., London (1976),
       and Protein, Nucleic Acid and Enzyme, Vol. 21, No. 4, pp. 245-333
       (1976), interferon is a name to designate glycoproteins
       that are extracellularly inducible in viable cell by subjecting it
       to the action of an interferon inducer, for
       example, virus, bacterium, protozoon, rickettsia,
       nucleic acid, endotoxin and polysaccharide, as well as having an
       activity of nonspecifically inhibiting viral growth.
       This activity has rendered interferons since the
SUMM
       discovery a potential prophylactic and therapeutic agent for viral
       diseases. Recent studies revealed that interferons exert
       an antioncotic activity on viral tumors, as well as on nonviral
       tumors. Because of the activity, the development of
       pharmaceuticals using interferons is in great
       expectation.
       Interferons include interferon-alpha (or
SUMM
       leukocyte interferon), interferon-beta
       (or fibroblast interferon), and interferon
       -gamma (or immune interferon). Preparation of
     interferon-alpha and interferon-beta
       has been established by using leukocyte and fibroblast cell.
       Recently, pharmaceuticals incorporated with these
     interferons have been commercialized.
SUMM
       Respective interferon will hereinafter be abbreviated as
       "IFN-alpha", "IFN-beta" and "IFN-gamma" occasionally with the
      prefix "Hu" representing human origin.
            . as epidemic conjunctivitis, herpetic keratitis,
DETD
      influenza, rubella, serum hepatitis, and acquired immune
      deficiency syndrome (AIDS); and nonviral diseases including
      malignant tumors such as colon carcinoma, lung
      carcinoma, liver carcinoma and osteosarcoma, and
      immunopathies including atopic allergy, myoasthenia, collagenosis,
      pernicious anemia, articular rheumatism, and systemic lupus
      erythematosus.
DETD
       . . . and therapeutic agent for viral disease such as those in
      small and large intestines, as well as that for malignant
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tumors such as colon carcinoma and liver

carcinoma, and immunopathies such as atopic allergy, pernicious anemia, articular rheumatism, and systemic lupus erythematosus. CLM What is claimed is: 1. A process for preparing a monoclonal antibody specific to human myelomonocyte interferon-gamma, comprising: propagating an established human myelomonocyte which produces myelomonocyte interferon-gamma; recovering and purifying the interferon-gamma produced by said human myelomonocyte; immunizing a non-human warm-blooded animal using the recovered and purified human myelomonocyte interferon-gamma as an antigen; recovering an antibody producing cell from the animal; fusing said antibody producing cell with a myeloma cell. . . produce hybrid cells; selecting from said hybrid cells a hybrid cell capable of producing antibody specific to human myelomonocyte interferon-gamma; and culturing the hybrid cell to produce said monoclonal antibody specific to human myelomonocyte interferon-gamma. claim 1, wherein said established human myelomonocyte is obtained by: implanting an established human myelomonocyte capable of producing human myelomonocyte interferon-gamma in a non-human warm-blooded animal, or inoculating the established human myelomonocyte in a diffusion chamber placed inside or outside the. L14 ANSWER 12 OF 19 USPATFULL 96:63033 USPATFULL ΤI Diagnostic and prognostic methods for solid non-lymphoid tumors and their metastases IN Barbera-Guillem, Emilio, Apt. 209B Chestnut Ridge, Amherst, NY, United States 14228 Cohen, Stefan A., 24 Wagon Wheel Dr., East Amherst, NY, United States 14051 PΙ US 5536642 960716 ΑI US 93-118969 930909 (8) DΤ Utility EXNAM Primary Examiner: Scheiner, Toni R. Hodgson, Russ, Andrews, Woods & Goodyear Number of Claims: 11 ECL Exemplary Claim: 1 6 Drawing Figure(s); 5 Drawing Page(s) LN.CNT 1132 CAS INDEXING IS AVAILABLE FOR THIS PATENT. The present invention is directed to the measurement of cell-associated interleukin-2 receptor .alpha. (IL-2R.alpha.) expression in solid non-lymphoid tumors, and the use of such measurement In prognosing the metastatic potential of the tumor, diagnosing the metastatic localization of non-lymphoid tumor, and aiding the monitoring of efficacy of anticancer therapy against metastatic cells of non-lymphoid tumor. The present invention also relates to the use of T-cell receptor (tumor specific TCR.beta. idiotype) in monitoring the efficacy of anticancer therapy against non-lymphoid tumors. CAS INDEXING IS AVAILABLE FOR THIS PATENT. . . . 39:3-21); (c) treatment is more complex than simple surgical excision of the primary tumor; (d) systemic therapy for metatstatic non-lymphoid tumors, such as renal cell carcinoma (Rosenberg et al., 1985, N. Engl. J. Med. 313:1485-1492), remains ineffective with little survival advantage; and (e) not. SUMM . . . of flavone-8-acetic acid and recombinant IL-2; U.S. Patent No. 5,098,702 to Zimmerman et al. disclosing a combination

of IL-2 and/or Interferon-.beta. and tumor

necrosis factor against tumor cells; U.S. Pat. No. 4,939,093 to

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McGrogan et al. disclosing methods for the production. . .
DETD
                                 . . . Colon Carcinoma
                    High.sup.(1)
                                   100%*
                         ND +
B16F10 Melanoma
                    High High +
                                   100%*
B16F10LM (B)
       Liver met. microfoci
                   Metastasis
                         ND ND
                                   100%*
       Melanoma
Human Tumors
SW480E Colon Carcinoma
                    Low.sup.(2)
                        Low -
                                   <18*
       Prim. Tum. (CL)
SW480
       Colon Carcinoma
                    Low.sup.(2)
                         Low +
                                   108*
       Prim. Tum. (CL)
SW480R Colon Carcinoma
                    High.sup.(2)
. . . Carcinoma (CL)
                    ND
                          ND
                                   50%*
HepG2
       Hepatoma (CL)
                    ND
                          ND
                                   758*
LS174T Colonic Carcinoma (CL)
                         ND
                                   50%*
VA59P (B)
       Osteo Sarcoma
                    Prim.Tum.
                         Low ND
VA59M (B)
       Limph.N.Met. (VA59P)
                    Metastatis
                         High ND
BICO5P (B)
       Colon Carcinoma
                    Prim.Tum.
                         ND ND
                                   58**
BIC52MH (B)
       Liver Met.(BIO5P)
DETD
E8
          colonic carcinoma
A549
           lung carcinoma
           renal carcinoma -
SEPPLO
HELA
           cervix carcinoma -
HL-60
          promyelocytic leukemia
HepG2
          hepatoma
Primary Tumor Biopsies
BVal50
        osteosarcoma
BVal21
           osteosarcoma
BVal84
           osteosarcoma
BVal8
           osteosarcoma
BVal46
          osteosarcoma
BVal76
          osteosarcoma
BVall02
          osteosarcoma
BVal56
          osteosarcoma
BVal88
          osteosarcoma
         osteosarcoma
BVal100
BVal154
          osteosarcoma
BVal-C1594 rethinoblastoma +
BVal-C-700 rethinoblastoma +
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ANSWER 13 OF 19 USPATFULL
L14
       96:43552 USPATFULL
ΑN
ΤI
       Preparation of human myelomonocyte interferon-gamma
       Kurimoto, Masashi, Okayama, Japan
IN
       Mitsuhashi, Masakazu, Okayama, Japan
PA
       Kabushiki Kaisha Hayashibara Seibutsu Kagaku Kenkyujo, Oakyama,
       Japan (non-U.S. corporation)
       Us 5518899 960521
PΙ
ΑI
       US 94-336224 941107 (8)
       Division of Ser. No. US 93-62323, filed on 17 May 1993, now
RLI
       patented, Pat. No. US 5362490 which is a continuation of Ser. No.
       US 91-658740, filed on 22 Feb 1991, now abandoned which is a
       continuation-in-part of Ser. No. US 87-78005, filed on 21 Jul
       1987, now abandoned And a continuation-in-part of Ser. No. US
       89-379318, filed on 13 Jul 1989, now abandoned
PRAI
       JP 86-176266 860725
       JP 87-125777 870525
       JP 88-184069 880723
DT
       Utility
      Primary Examiner: Naff, David M.
EXNAM
       Browdy and Neimark
CLMN
       Number of Claims: 5
ECL
       Exemplary Claim: 1
       2 Drawing Figure(s); 2 Drawing Page(s)
LN.CNT 1146
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       The present invention relates to a novel human interferon
       -gamma derived from an established human myelomonocyte, a process
       to prepare said interferon-gamma, and its use. The human
       myelomonocyte interferon-gamma has a novel polypeptide
       and carbohydrate chain structure, and it is effective in
       preventing and treating viral diseases, malignant tumors and
       immunopathies alone or in combination with other lymphokine and/or
       chemotherapeutic. The human myelomonocyte interferon
       -gamma may be produced by culturing an established human
       myelomonocyte on a culture medium in vitro. Alternatively, an
       established human myelomonocyte is implanted in a non-human
       warm-blooded animal or in a diffusion chamber placed inside or
       outside the body of the animal, and then allowed to proliferate
       while receiving nutrient body fluid from the animal. The human
       myelomonocyte may be contacted with an inducer during propagation.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
TΤ
       Preparation of human myelomonocyte interferon-gamma
AΒ
       The present invention relates to a novel human interferon
       -gamma derived from an established human myelomonocyte, a process
       to prepare said interferon-gamma, and its use. The human
       myelomonocyte interferon-gamma has a novel polypeptide
       and carbohydrate chain structure, and it is effective in
      preventing and treating viral diseases, malignant tumors and
       immunopathies alone or in combination with other lymphokine and/or
       chemotherapeutic. The human myelomonocyte interferon
       -gamma may be produced by culturing an established human
      myelomonocyte on a culture medium in vitro. Alternatively, an
       established human myelomonocyte.
SUMM
      The present invention relates to a novel human myelomonocyte
     interferon-gamma, a process to prepare said
     interferon-gamma, and its use.
      More particularly, the present invention relates to a novel human
      myelomonocyte interferon-gamma, and a process for
      preparing said interferon-gamma, characterized by
      allowing an established human myelomonocyte capable of producing
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myelomonocyte interferon-gamma to produce said interferon-gamma, and recovering the accumulation; a process to prepare a monoclonal anti-interferon-gamma antibody using the same; and a method for purifying said interferon-gamma using the monoclonal antibody, as well as to a prophylactic and therapeutic agent for interferon -gamma susceptive disease containing the human myelomonocyte interferon-gamma as an effective ingredient. As described in Shigeyasu Kobayashi, "Interferon", published by Kodansha Co., Ltd., Tokyo, Japan (1975), D. A. J. Tyrrell, "Interferon and its Clinical Potential", published by William Heinemann Medical Books Ltd., London (1976), and Protein, Nucleic Acid and Enzyme, Vol.21, No.4, pp.245-333 (1976), interferon is a name to designate glycoproteins that are extracellularly inducible in viable cell by subjecting it to the action of an interferon inducer, for example, virus, bacterium, protozoon, rickettsia, nucleic acid, endotoxin and polysaccharide, as well as having an activity of nonspecifically inhibiting viral growth. This activity has rendered interferons since the SUMM discovery a potential prophylactic and therapeutic agent for viral diseases. Recent studies revealed that interferons exert an antioncotic activity on viral tumors, as well as on nonviral tumors. Because of the activity, the development of pharmaceuticals using interferons is in great expectation. Interferons include interferon-alpha (or SUMM leukocyte interferon), interferon-beta (or fibroblast interferon), and interferon -gamma (or immune interferon). Preparation of interferon-alpha and interferon-beta has been established by using leukocyte and fibroblast cell. Recently, pharmaceuticals incorporated with these interferons have been commercialized. Respective interferon will hereinafter be abbreviated as SUMM "IFN-alpha", "IFN-beta" and "IFN-gamma" occasionally with the prefix "Hu" representing human origin. . . as epidemic conjunctivitis, herpetic keratitis, DETD influenza, rubella, serum hepatitis, and acquired immune deficiency syndrome (AIDS); and nonviral diseases including malignant tumors such as colon carcinoma, lung carcinoma, liver carcinoma and osteosarcoma, and immunopathies including atopic allergy, myoasthenia, collagenosis, pernicious anemia, articular rheumatism, and systemic lupus erythematosus. . and therapeutic agent for viral disease such as those in DETD small and large intestines, as well as that for malignant tumors such as colon carcinoma and liver carcinoma, and immunopathies such as atopic allergy, pernicious anemia, articular rheumatism, and systemic lupus erythematosus. CLM What is claimed is: 1. A process for preparing a human myelomonocyte interferon-gamma, comprising: propagating an established human myelomonocyte which produces myelomonocyte interferon-gamma; and recovering and purifying the interferon-gamma produced by said myelomonocyte.

. claim 1, wherein said established human myelomonocyte is obtained by: implanting an established human myelomonocyte capable of producing human myelomonocyte interferon-gamma in a non-human warm-blooded animal, or inoculating the established human myelomonocyte in a diffusion chamber placed inside or outside the. . .

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96:31583 USPATFULL
АŊ
       Method for treating biological damage using a free-radial
TI
       scavenger and interleukin-2
       Zimmerman, Robert, Lafayette, CA, United States
IN
       Marafino, Jr., Benedict J., San Francisco, CA, United States
       Cetus Oncology Corporation, Emeryville, CA, United States (U.S.
PΑ
       corporation)
       US 5508031 960416
PΙ
ΑI
       US 94-289844 940812 (8)
       Continuation of Ser. No. US 93-49070, filed on 16 Apr 1993, now
RLI
       abandoned which is a continuation of Ser. No. US 90-626975, filed
       on 12 Dec 1990, now abandoned which is a division of Ser. No. US
       89-399386, filed on 25 Aug 1989, now patented, Pat. No. US 4985241
       which is a continuation of Ser. No. US 87-113643, filed on 26 Oct
       1987, now abandoned which is a continuation-in-part of Ser. No. US
       86-933475, filed on 21 Nov 1986, now abandoned
       Utility
EXNAM
       Primary Examiner: Walsh, Stephen G.
       Gass, David A.; Savereide, Paul B.; Blackburn, Robert P.
LREP
       Number of Claims: 17
       Exemplary Claim: 1
       No Drawings
LN.CNT 1581
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Damage to cells, tissue and other body parts in a mammalian host
       may be treated by using a lymphokine or cytotoxin in conjunction
       with at least one biological modifier, which may be a free radical
       scavenger or a metabolic inhibitor. The biological modifier is
       preferably uric acid, buthionine sulphoximine, vitamin C, aspirin,
       or nordihydroguaiaretic acid. Such a combination may be used to
       treat, for example, cancer, infectious diseases, and damage caused
       by radiation therapy, high oxygen tension, and chemotherapy.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Lymphokines and cytotoxins, such as interleukin-2,
     interferon-alpha, interferon-gamma, colony
       stimulating factor, and tumor necrosis factor, are proteins
       secreted by T cells and/or macrophages upon activation by antigens
       Interferons (IFN) constitute a group of naturally
SUMM
       occurring proteins which are known to exhibit anti-viral,
       anti-tumor and immunoregulatory behavior. Two types. . .
       have been identified based on differences in their observed
       biological properties and molecular structures: Type I and Type
       II. Beta-interferon (IFN-.beta.) is a Type I IFN which
       can be induced in fibroblasts by viral challenge and contains
       about 165 amino.
       . . . Kreuzes)) or with augmentation of natural killer activity
SUMM
       (Svedersky et al., J. Immunol. (1984), 133:714-718 and Shalaby et
       al., J. Interferon Res. (1985), 5:571-581). In addition,
       U.S. Statutory Invention Reg. No. H22, published Feb. 4, 1986 to
       Creasey et al., discloses. . . in combination therapy of
       certain breast cancer and myeloma cell lines using synergistically
       effective amounts of 5-fluorouracil and human recombinant beta-
     interferon. Furthermore, enhanced anti-tumor activity has
       been observed using IFN-.gamma. in combination with TNF and
       chemotherapeutic agents. Svedersky et al., Internl..
         . . foreign agents such as pathogens in the cell. Examples of
DETD
       such lymphokines and cytotoxins include, but are not limited to,
     interferons (e.g., interferon-alpha,
       (IFN-.alpha.), interferon-beta, (IFN-.beta.),
       and interferon-gamma, (IFN-.alpha.)), interleukins (e.g., interleukin-1 (IL-1), interleukin-2 (IL-2), interleukin-3
       (IL-3), and interleukin-4 (IL-4)), tumor necrosis factor-alpha
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(TNF-.alpha.), tumor necrosis factor-beta (TNF-.beta.).

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inhibitory activity factor (MIF), macrophage-activating factor
       (MAF), NK cell activating factor, T cell replacing factor,
       leukocyte-inhibitory factor (LIF), other lymphotoxins,
     osteoclast-activating factor (OAF), soluble immune
       response suppressor (SIRS), growth-stimulating factor, a monocyte
       growth factor, etc. Preferably, the lymphokine or cytotoxin is an
       interleukin (more preferably IL-2), an interferon (more
       preferably IFN-.beta.), TNF-.alpha. or -.beta., or a colony
       stimulating factor (more preferably CSF-1). The most preferred
       herein is TNF-.alpha..
         . . term "cancer" as used in the above definition refers to
DETD
       any neoplastic disorder, including such cellular disorders as, for
       example, renal cell cancer, Kaposi's sarcoma,
       chronic leukemia, breast cancer, sarcoma, ovarian carcinoma,
       rectal cancer, throat cancer, melanoma, colon
     cancer, bladder cancer, mastocytoma, lung cancer
       and gastrointestinal or stomach cancer. Preferably, the
     cancer is colon cancer, melanoma,
     renal cell cancer, sarcoma, lung cancer,
       adenocarcinoma, or breast cancer.
       The typical dosage level of interferon (especially
DETD
       INF-.beta.) in humans ranges from about 100 units to one billion
       units/m.sup.2. Preferably, IFN-.beta. is administered to humans
              anti-tumor effect in animals and humans. The preclinical
DETD
       response of TNF alone correlated with a clinical response of TNF
       to colon cancer.
                             Levels Correlate
DETD
With TNF Resistance In Vivo
             .mu.M Total
                            % Tumor Growth
             Glutathione
             Equivalents/10.sup.6 cells
Tumor Line
                            Inhibition.sup.a
PAN-02 (mouse
             484 .+-. 90
                             0
tumor)
HT29 (human colon
              308 .+-. 131
tumor)
P815 (mouse tumor)
              305 .+-. 197
P388 (mouse tumor)
              280 .+-. 150 15
B-16 (mouse tumor)
             180 .+-.. . .
L14 ANSWER 15 OF 19 USPATFULL
       94:97330 USPATFULL
ΑN
       Human myelomonocyte interferon-gamma, and process for
ΤI
       preparation and use thereof
       Kurimoto, Masashi, Okayama, Japan
ΙN
       Mitsuhashi, Masakazu, Okayama, Japan
       Kabushiki Kaisha Hayashibara Seibutsu Kagaku Kenkyujo, Okayama,
PΑ
       Japan (non-U.S. corporation)
ΡI
       US 5362490 941108
       US 93-62323 930517 (8)
AΙ
       Continuation of Ser. No. US 91-658740, filed on 22 Feb 1991, now
RLI
       abandoned which is a continuation-in-part of Ser. No. US 87-78005,
       filed on 21 Jul 1987, now abandoned And a continuation-in-part of
       Ser. No. US 89-379318, filed on 13 Jul 1989, now abandoned
       JP 86-176266 860725
PRAI
       JP 87-125777 870525
       JP 88-184069 880725
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DT

Utility

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EXNAM Primary Examiner: Wax, Robert A.; Assistant Examiner: Bugaisky,
       Gabriele E.
LREP
       Browdy and Neimark
       Number of Claims: 22
CLMN
ECL
       Exemplary Claim: 1
       2 Drawing Figure(s); 2 Drawing Page(s)
DRWN
LN.CNT 1185
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       The present invention relates to a novel human interferon
ΑB
       -gamma derived from an established human myelomonocyte, a process
       to prepare said interferon-gamma, and its use. The human
       myelomonocyte interferon-gamma has a novel polypeptide
       and carbohydrate chain structure, and it is effective in
       preventing and treating viral diseases, malignant tumors and
       immunopathies alone or in combination with other lymphokine and/or
       chemotherapeutic.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Human myelomonocyte interferon-gamma, and process for
TΙ
       preparation and use thereof
       The present invention relates to a novel human interferon
AΒ
       -gamma derived from an established human myelomonocyte, a process
       to prepare said interferon-gamma, and its use. The human
       myelomonocyte interferon-gamma has a novel polypeptide
       and carbohydrate chain structure, and it is effective in
       preventing and treating viral diseases, malignant tumors.
       The present invention relates to a novel human myelomonocyte
SUMM
     interferon-gamma, a process for preparing this
     interferon-gamma, and its use.
      More particularly, the present invention relates to a novel human
SUMM
       myelomonocyte interferon-gamma, and a process for
       preparing this interferon-gamma, characterized by
       allowing an established human myelomonocyte capable of producing
       myelomonocyte interferon-gamma to produce the
     interferon-gamma, and recovering the accumulation; a
       process for preparing a monoclonal anti-interferon-gamma
       antibody using the myelomonocyte; and a method for purifying the
     interferon-gamma using the monoclonal antibody, as well as
       to a prophylactic and therapeutic agent for interferon
       -gamma susceptible disease, these agents containing the human
       myelomonocyte interferon-gamma as an effective
       ingredient thereof.
       As described in Sigeyasy Kobayashi, "Interferon",
SUMM
       published by Kodansha Co., Ltd. Tokyo, Japan (1975), D. A. J.
       Tyrrell, "Interferon and its Clinical Potential",
       published by William Heinemann Medical Books Ltd., London (1976),
       and Protein, Nucleic Acid and Enzyme, Vol. 21, No. 4, pp. 245-333
       (1976), interferon is a name used to designate
       glycoproteins that can be extracellularly induced in a viable cell
       by subjecting the cell to the action of an interferon
     inducer, such as a virus, a bacterium, a protozoon,
     rickettsia, nucleic acid endotoxin, or polysaccharide.
       These glycoproteins also are capable of nonspecifically inhibiting
       viral growth.
       This activity has made interferons potential
SUMM
       prophylactic and therapeutic agents for viral diseases. Recent
       studies revealed that interferons exert an antioncotic
       activity on viral tumors, as well as on nonviral tumors. Because
       of the activity of interferons, there is much interest
       in developing pharmaceuticals using interferons.
       Interferons include interferon-alpha (or
SUMM
       leukocyte interferon), interferon-beta
       (or fibroblast interferon), and interferon
       -gamma (or immune interferon). Preparation of
```

interferon-alpha and interferon-beta

has been effected by using leukocytes and fibroblast cells. Recently, pharmaceuticals containing these **interferons** have been commercialized.

SUMM The interferons hereinafter will be abbreviated as "IFN-alpha", IFN-beta", and "IFN-gamma", occasionally with the prefix "Hu" indicating human origin.

DETD . . . conjunctivitis, herpetic keratitis, influenza, rubella, serum hepatitis, and acquired immune deficiency syndrome (AIDS); as well as nonviral diseases including malignant tumors such as colon carcinoma, lung carcinoma, liver carcinoma and osteosarcoma; immunopathies including atopic allergy, myasthenia, collagenosis, pernicious anemia, articular rheumatism, and systemic lupus erythematosus.

DETD . . . and therapeutic treatment of viral diseases such as those in the small and large intestines, as well as for malignant tumors such as colon carcinoma and liver carcinoma, and immunopathies such as atopic allergy, pernicious

- 1. A prophylactic and therapeutic composition for human interferon-gamma-susceptible diseases comprising an effective amount of human myelomonocyte interferon-gamma for preventing or treating said human interferon -gamma-susceptible diseases and a pharmaceutically acceptable carrier.
- 2. The composition of claim 1 wherein said human myelomonocyte interferon-gamma is produced by: propagating an established human myelomonocyte which produces myelomonocyte interferon-gamma and recovering and purifying the interferon-gamma produced by said myelomonocyte.
 - . claim 2 wherein said established human myelomonocyte is produced by: implanting an established human myelomonocyte capable of producing human myelomonocyte interferon-gamma in a non-human warm-blooded animal; and allowing said established human myelomonocyte to proliferate while allowing said established human myelomonocyte to. . .
- 5. The composition of claim 2 wherein said human myelomonocyte interferon-gamma is purified by column chromatography using an anti-interferon-gamma antibody.
- 9. The composition of claim 1 in which said human myelomonocyte interferon-gamma is present in the range of 1-10,000 units/q.
- 11. The composition of claim 1 wherein said lymphokine is selected from the group consisting of interferon-alpha, interferon-beta, tumor necrosis factor, lymphotoxin, interleukin 2, B-cell differentiating factor, and mixtures thereof.
 - 12. A human myelomonocyte interferon-gamma.
 - 13. The human myelomonocyte interferon-gamma of claim 12 which is obtained by: propagating an established human myelomonocyte which produces myelomonocyte interferon -gamma; and recovering and purifying the interferon -gamma produced by said myelomonocyte.
 - 14. The human myelomonocyte interferon-gamma of claim
 13, wherein said established human myelomonocyte is obtained by:
 implanting an established human myelomonocyte capable of producing
 human myelomonocyte interferon-gamma in a non-human
 warm-blooded animal or inoculating the established human

myelomonocyte capable of producing human myelomonocyte interferon-gamma into a diffusion chamber placed inside or outside the body of a non-human warm-blooded animal; and allowing the established human. 15. The human myelomonocyte interferon-gamma of claim 13 wherein said established human myelomonocyte is selected from the group consisting of HBL-38 cells, HL-60 cells (ATCC. 16. The human myelomonocyte interferon-gamma of claim 13 wherein said interferon-gamma is purified by column chromatography using an anti-interferon-gamma antibody. 17. The human myelomonocyte interferon-gamma of claim 13, wherein said established human myelomonocyte is contacted with an inducer. 18. The human myelomonocyte interferon-gamma of claim 17 wherein said inducer is selected from the group consisting of phytohemagglutinin, concanavalin A, pokeweed mitogen, lipopolysaccharide, lipid. 19. A method for treating diseases which are susceptible to treatment by human myelomonocyte interferon-gamma comprising administering to a patient suffering from a disease which is susceptible to treatment by human myelomonocyte interferon-gamma an effective amount to treat said disease which is susceptible to such treatment of a composition according to claim 1. 22. The method according to claim 21 wherein said lymphokine is selected from the group consisting of interferon-alpha, interferon-beta, tumor necrosis factor, lymphotoxin, interleukin 2, B cell differentiating factor, and mixtures thereof. L14 ANSWER 16 OF 19 USPATFULL 92:53099 USPATFULL Process to prepare metastasis-inhibitory factor Kurimoto, Masashi, Okayama, Japan Motoda, Ryuichi, Okayama, Japan Iwaki, Kanso, Okayama, Japan Kaisha Hayashibara Seibutsu Kagaku Kenkyujo, Okayama, Japan (non-U.S. corporation) US 5126148 920630 US 90-526143 900522 (7) JP 89-128362 890522 Utility Primary Examiner: Robinson, Douglas W.; Assistant Examiner: Witz, EXNAM Jean C. Browdy and Neimark Number of Claims: 9 Exemplary Claim: 1 No Drawings LN.CNT 461 CAS INDEXING IS AVAILABLE FOR THIS PATENT. Human hematopoietic cells produce metastasis-inhibitory factor (MIF). MIF exhibits a remarkable metastasis-inhibitory activity on viral diseases and immunopathies, as well as on malignant tumors. The MIF-producing human hematopoietic cells are easily proliferative by in vitro tissue culture and in vivo proliferation using a non-human warm-blooded animal. T cells exhibit a high MIF producibility. Mitogens augment the production of MIF when used as

ΑN

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LREP

CLMNECL

DRWN

an MIF inducer.

CAS INDEXING IS AVAILABLE FOR THIS PATENT. . . . we found that metastasis-inhibitory substances can be

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established human colon cancer cell, for their
       metastasis-inhibitory activity. Furthermore, we established a
       process to prepare MIF which comprises allowing an established
       human hematopoietic.
          . . epidemic conjunctivitis, herpetic keratitis, influenza,
SUMM
       rubella, serum hepatitis and acquired immune deficiency syndrome
       (AIDS); and non-viral diseases, for example, malignant
     tumors including colon cancer, lung
     cancer, liver cancer and osteosarcoma, and
       immunopathies such as atopic allergy, myastheniagravis, collagen
       disease, malignant anemia, articular rheumatism and systemic lupus
       ervthematodus.
SUMM
       . . . of MIF. If necessary, they can be incorporated with one
       or more lymphokines, and/or natural or synthetic
       chemotherapeutics, for example, interferon-.alpha.,
     interferon-.beta., interferon-.gamma.,
       tumor necrosis factor, lymphotoxin, interleukin 1, interleukin 2
       and B-cell differentiating factor, in order to augment their
       prophylactic and therapeutic.
SUMM
       . . . (1987) with a slight modification, wherein a lung
       metastasis is induced with RPMI 4788 cell (FERM BP-2429), an
       established human colon cancer cell, in nude
       mice which are then administered with a liquid sample containing
       MIF to determine its metastasis-inhibitory activity.
SUMM
       . . . of MIF that halves the number of nodules, provided that
       the control forms 100 or more nodules under these conditions.
     Interferon-.alpha., interferon-.beta.,
     interferon-.gamma., tumor necrosis factor-.alpha., tumor
       necrosis factor-.beta., interleukin 1 and interleukin 2 are
       removed from the liquid sample prior to its.
SUMM
      The product suppresses, in addition to the lung metastasis of RPMI
       4788 cell, a human colon cancer cell, the
       liver metastasis of Lovo cell (ATCC CCL 229), a human
     colon cancer cell.
      What is claimed is:
CLM
      . the obtained fraction to gel filtration chromatography and
      recovering the fraction with a molecular weight of 10,000-450,000;
      and removing any interferon-.alpha., interferon
       -.beta., interferon-.gamma., tumor necrosis
       factor-.alpha., tumor necrosis factor-.beta., interleukin 1 and
       interluekin 2, whereby a fraction is obtained which is rich in MIF
      which exhibits metastasis-inhibitory activity when assayed with an
       established human colon cancer cell, RPMI 4789
       (FERM BP-2429).
L14 ANSWER 17 OF 19 USPATFULL
AN
       91:4937 USPATFULL
ΤI
      Therapeutic combination of free-radical scavenger and tumor
      necrosis factor
IN
      Zimmerman, Robert, Lafayette, CA, United States
      Marafino, Jr., Benedict J., San Francisco, CA, United States
PA
      Cetus Corporation, Emeryville, CA, United States (U.S.
      corporation)
      US 4985241 910115
ΡI
      US 89-399386 890825 (7)
ΑI
RLI
      Continuation of Ser. No. US 87-113643, filed on 26 Oct 1987, now
      abandoned which is a continuation-in-part of Ser. No. US
      86-933475, filed on 21 Nov 1986, now abandoned
DT
      Utility
      Primary Examiner: Draper, Garnette D.
EXNAM
LREP
      Giotta, Gregory J.; Hasak, Janet E.; Halluin, Albert P.
CLMN
      Number of Claims: 17
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ECL

Exemplary Claim: 1

screened by checking them with RPMI 4788 cell (FERM BP-2429), an

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No Drawings
DRWN
LN.CNT 1333
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Damage to cells, tissue and other body parts in a mammalian host
       may be treated by using a lymphokine or cytotoxin in conjunction
       with at least one biological modifier, which may be a free radical
       scavenger or a metabolic inhibitor. The lymphokine or cytotoxin is
       preferably tumor necrosis factor and the biological modifier is
       preferably uric acid, buthionine sulphoximine, vitamin C, aspirin,
       or nordihydroguaiaretic acid. Such a combination may be used to
       treat, for example, cancer, infectious diseases, and damage caused
       by radiation therapy, high oxygen tension, and chemotherapy.
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
       Lymphokines and cytotoxins, such as interleukin-2,
     interferon-alpha, interferon-gamma, colony
       stimulating factor, and tumor necrosis factor, are proteins
       secreted by T cells and/or macrophages upon activation by antigens
SUMM
       Interferons (IFN) constitute a group of naturally
       occurring proteins which are known to exhibit anti-viral,
       anti-tumor and immunoregulatory behavior. Two types. . .
       have been identified based on differences in their observed
       biological properties and molecular structures: Type I and Type
       II. Beta-interferon (IFN-.beta.) is a Type I IFN which
       can be induced in fibroblasts by viral challenge and contains
       about 165 amino.
       . . Kreuzes)) or with augmentation of natural killer activity
SUMM
       (Svedersky et al., J. Immunol. (1984), 133:714-718 and Shalaby et
       al., J. Interferon Res. (1985), 5:571-581). In addition,
       U.S. Statutory Invention Reg. No. H22, published Feb. 4, 1986 to
       Creasey et al., discloses. . . in combination therapy of
       certain breast cancer and myeloma cell lines using synergistically
       effective amounts of 5-fluorouracil and human recombinant beta-
     interferon. Furthermore, enhanced anti-tumor activity has
       been observed using IFN-.gamma. in combination with TNF and
       chemotherapeutic agents. Svedersky et al., Internl..
DETD
       . . . foreign agents such as pathogens in the cell. Examples of
       such lymphokines and cytotoxins include, but are not limited to,
     interferons (e.g., interferon-alpha,
       (IFN-.alpha.), interferon-beta, (IFN-.beta.),
       and interferon-gamma, (IFN-.alpha.)), interleukins
       (e.g., interleukin-1 (IL-1), interleukin-2 (IL-2), interleukin-3
       (IL-3), and interleukin-4 (IL-4)), tumor necrosis factor-alpha
       (TNF-.alpha.), tumor necrosis factor-beta (TNF-.beta.).
      inhibitory activity factor (MIF), macrophage-activating factor
       (MAF), NK cell activating factor, T cell replacing factor,
      leukocyte-inhibitory factor (LIF), other lymphotoxins,
    osteoclastactivating factor (OAF), soluble immune response
      suppressor (SIRS), growth-stimulating factor, a monocyte growth
      factor, etc. Preferably, the lymphokine or cytotoxin is an
      interleukin (more preferably IL-2), an interferon (more
      preferably IFN-.beta.), TNF-.alpha. or -.beta., or a colony
      stimulating factor (more preferably CSF-1). The most preferred
      herein is TNF-.alpha..
DETD
      . . . term "cancer" as used in the above definition refers to
      any neoplastic disorder, including such cellular disorders as, for
      example, renal cell cancer, Kaposi's sarcoma,
      chronic leukemia, breast cancer, sarcoma, ovarian carcinoma,
      rectal cancer, throat cancer, melanoma, colon
    cancer, bladder cancer, mastocytoma, lung cancer
      and gastrointestinal or stomach cancer. Preferably, the
    cancer is colon cancer, melanoma,
    renal cell cancer, sarcoma, lung cancer,
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adenocarcinoma, or breast cancer.

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The typical dosage level of interferon (especially
        INF-.beta.) in humans ranges from about 100 units to one billion
        units/m.sup.2 Preferably, IFN-.beta. is administered to humans in.
              . anti-tumor effect in animals and humans. The preclinical
 DETD
        response of TNF alone correlated with a clinical response of TNF
        to colon cancer.
 DETD
                               Correlate
 With TNF Resistance In Vivo
                 .mu.M total
                 Glutathione
                 Equivalents/
                           % Tumor Growth
Tumor Line
                 10.sup.6 cells
                           Inhibition.sup.a
PAN-02 (mouse
                 484 .+-. 90
                            Ω
tumor)
HT29 (human colon
                 308 .+-. 131
tumor)
P815 (mouse tumor)
                305 .+-. 197
                          20
P388 (mouse tumor)
                280 .+-. 150
                          15
B-16 (mouse tumor)
                180 .+-.. .
     ANSWER 18 OF 19 USPATFULL
L14
ΑN
       90:42339 USPATFULL
TΙ
       Method of treating interferon sensitive diseases, and a
       method and device for preparing .gamma.-interferon
       containing preparation
IN
       Lindblom, Ragnvald E., Alsater, S-740 10 Almunge, Sweden
       Rothman, Ulf S., Box 120, S-230 10 Skanor, Sweden
ΡI
       US 4929443 900529
       US 87-50470 870518 (7)
ΑI
       Continuation of Ser. No. US 85-711567, filed on 13 Feb 1985, now
RLI
       abandoned which is a continuation of Ser. No. US 83-503575, filed
       on 13 Jun 1983, now abandoned
DT
       Utility
EXNAM Primary Examiner: Hazel, Blondel
LREP
       Bacon & Thomas
CLMN
       Number of Claims: 6
ECL
       Exemplary Claim: 1
DRWN
       No Drawings
LN.CNT 302
CAS INDEXING IS AVAILABLE FOR THIS PATENT.
      Methods and means for treating interferon-sensitive
AB
       diseases are disclosed, wherein a whole blood sample is taken from
       a patient suffering from such disease and is incubated in vitro
       together with a mitogen to produce .gamma.-interferon.
      After incubation the whole blood sample is subjected to a
      separation step for producing a blood plasma product, which is
      free from the mitogen but contains .gamma.-interferon.
      This blood plasma product is used for re-administration to the
      patient from which the whole blood sample was taken.
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CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD

Method of treating interferon sensitive diseases, and a TΤ method and device for preparing .gamma.-interferon

```
containing preparation
ΑB
       Methods and means for treating interferon-sensitive
       diseases are disclosed, wherein a whole blood sample is taken from
       a patient suffering from such disease and is incubated in vitro
       together with a mitogen to produce .gamma.-interferon.
       After incubation the whole blood sample is subjected to a
       separation step for producing a blood plasma product, which is
       free from the mitogen but contains .gamma.-interferon.
       This blood plasma product is used for re-administration to the
       patient from which the whole blood sample was taken.
       The present invention relates to a novel method of producing
     interferon, a novel method of treatment for preventing and
       treating interferon sensitive diseases and novel means
       for carrying out these methods.
SUMM
       Interferons are proteinaceous substances which are
       induced intra cellularly or extra cellularly upon exposure of the
       cells to interferon inducing agents such as viruses,
       bacteria, protozoes, rickettsia, nucleic acids,
       endotoxines, polysaccharides, etc.
SUMM
       Interferons have a great potential interest as drugs
       since they unspecifically inhibit the growth of various viruses in
       the cells, have.
       However, the development of interferon as a drug is
       severely inhibited by the great difficulties in preparing the
       necessary amounts, i.a. depending on the fact that
     interferon is species specific. Thus, only
     interferon originating from live human cells is useful for
       human therapy. For the preparation of interferon human
       leukocytes and the like are conventionally used, and the very
       limited supply of such starting material is a great.
SUMM
       Attempts have also been made to prepare interferon in
       vitro by culturing established human cells on a nutrient medium in
       the presence of various interferon inducers. However,
       not either this method has given the desired results.
SUMM
       In recent years it has been established that human
     interferon exists in at least three different molecular
       variants, viz. .alpha.-interferon (previously called
       leukocyte interferon), .beta.-
     interferon (previously fibroblast interferon),
       and .gamma.-interferon (previously immune
     interferon).
       It is further known from numerous publications that many
SUMM
       substances induce the formation of interferons. Thus,
       .alpha.- and .beta.-interferon are induced by viruses,
       and .gamma.-interferon by so called mitogens and
       antigens.
       .gamma.-interferon is believed to have a tremendeous
SUMM
       potential as an agent for treating interferon-sensitive
       diseases, such as tumours. However, .gamma.-interferon
       is difficult to produce and is unstable, and attempts to stabilize
       it have so far been unsuccessful.
SUMM
      The present invention suggests a new approach to the problem of
       preparing and using .gamma.-interferon for treating
     interferon-sensitive diseases. A first aspect of the
       invention is based on the per se well known fact that mitogens
       induce the production of .gamma.-interferon, and in
       accordance with this aspect of the invention .gamma.-
     interferon production is induced by incubating whole blood
       samples from a patient to be treated with one or more mitogens in.
            incubation has been terminated the incubated blood sample is
       subjected to a separation step to produce a plasma containing the
     interferon produced but not the mitogen. The incubation
       and separation steps are performed in vitro.
SUMM
      In a second aspect of the invention the (.gamma.)
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interferon-containing plasma is then re-administered to

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preparation which does not only originate from the same species (a
      human) but from the same individual (himself/herself): the
      preparation. . . following: a very simple, rapid and
      inexpensive production of the preparation, elimination or
      considerable reduction of the instability problems with .gamma.-
     interferon, reduced side effects because of the individual
       specificity, etc.
SUMM
      It is essential to separate the mitogen before re-administering
      the interferon containing plasma to the patient. For
       this separation any suitable conventional separation technique can
      be used, provided that the same. . . capable of separating all
       of the mitogen from the plasma product while leaving a
       therapeutically effective amount of the produced
     interferon therein. The separation technique can be based
       on the physical and/or biological/biochemical properties of the
      mitogen. Examples of suitable separation.
SUMM
      When using ultrafiltration the cut-off properties of the ultra
       filter are chosen with regard to the choice of the .gamma .-
     interferon inducing mitogens. Thus, the filter and the
      mitogens should be chosen such that .gamma.-interferon
      can pass through the filter, whereas the mitogens are excluded, or
      vice versa. Since the major part of .gamma.-interferon
      has a molecular weight of about 20,000-75,000 (with a minor part
      having a molecular weight of about 65,000-70,000) the filter.
         at least 50,000 to pass through, when the mitogen has a
      molecular weight which is higher than that of the
     interferon. The upper cut-off limit is chosen with regard
       to the molecular weight of the mitogen used. Obviously the mitogen
      must. . . permitting a cut-off value of the filter of e.g.
      about 100,000, which also permits the minor part (see above) of
       .gamma.-interferon to pass through the filter. Mitogens
      having comparatively low molecular weights, e.g. overlapping the
      molecular weight range for the interferon, can be bound
      to a suitable matrix to increase the molecular weight and permit
      separation by ultrafiltration. As mentioned above.
      molecular mitogens can be separated by using a filter having a low
      cut-off limit permitting the mitogen, but not the
     interferon to pass through.
      The incubation of the whole blood sample with the mitogen (or
SUMM
      mitogens) is carried out under conditions promoting .gamma.-
    interferon production, e.g. at a temperature of about
       35.degree. to 40.degree. C. and for e.g. at least about 2 or 4. .
          to be used depends on the specific mitogen. This amount is
       chosen so as to produce an optimal amount of .gamma.-
    interferon, and it can easily be established by a person
       of average skill in the art by simple tests. Excessive amounts of
      mitogen should be avoided since this may inhibit the
     interferon production. For the preferred mitogen PHA
       suitable amounts are e.g. from about 1 to about 5 .mu.g PHA per
      ml.
      The preferred mode of administering the interferon
SUMM
      -containing preparation is by intramuscular injection, but also
      other routes may be possible, such as intravenous or subcutaneous
      injection. Where combined treatment with a histamine H2-antagonist
      is used, the histamine H2-antagonist may be injected together with
      the .gamma.-interferon-containing plasma or it may be
      administered separately, e.g. by the oral route. The dosage of the
      histamine H2-antagonist will vary.
      It is believed that the effect obtained by means of the
SUMM
    interferon preparation and treatment in accordance with
       the invention is a result both of the direct effect of .gamma.-
    interferon as such and on the fact that .gamma.-
    interferon triggers the production of .alpha. - and .beta. -
    interferon in vitro and/or in vivo. It may in this context
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the same patient, who will thus receive an interferon

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be mentioned that .alpha. - and .beta. - interferon are
       capable of passing through the filter together with .gamma .-
     interferon (when using this separation technique). The
       incubation of the whole blood sample with the mitogen also
       triggers the production of other lymphokines, which further
       enhance the effect of the .gamma.-interferon-containing
       blood plasma. In particular the triggered production of
       interleukins, especially interleukin II (ILII), is believed to
       give a valuable contribution. . . mentioned diseases. Such
       lymphokins, especially ILII, can readily be separated from the
       mitogen in the separation step, together with the
     interferons. For example, ILII has a suitable molecular
       weight somewhat lower than that of .gamma.-interferon.
SUMM
       In a further aspect of the invention the interferon
       -containing plasma is administered in combination with a histamine
       H2-antagonist. As is well known, histamine H2-antagonists are
       compounds which block histamine. . . the invention it has
       unexpectedly been found that a synergistic effect, in particular a
       synergistic anti-tumour effect, is achieved when .gamma.-
     interferon is administered together with a histamine
       H2-antagonist such as cimetidine. The mechanism of this
       synergistic effect has not been clarified.
       The ultrafiltrate obtained was tested as to interferon
DETD
       activity in the so-called NK system (as described by Ratliff et al
       in Cellular Immunology, Vol. 57, Jan. 1, 1981).
       . . . to stimulate the NK (natural killer) activity of
DETD
      mononuclear blood or spleen cells as an indicator of the presence
       of gamma-interferon. The test was a standard test for NK
       lymphocyte activity making use of target cells from a very
       sensitive cell. . . Mononuclear cells of healthy human donor
      were incubated for 2 hrs at 37.degree. C. with plasma to be tested
       for interferon content, after which the cells were added
       to K 562 target cells at various ratios and incubated for 4 hrs..
       .gamma.-interferon-containing rat plasma was prepared as
DETD
       in Example 2, using PHA (available from Pharmacia AB, Uppsala,
      Sweden) as the mitogen. The .gamma.-interferon
      preparation was injected intramuscularly (21 doses of 0.1-0.4 ml
      per animal) in combination with a histamine H2-antagonist
       (cimetidine) to rats which had been challeged subcutaneously with
      a transplantable DMH-induced colon carcinoma isograft
       (1.5.times.10.sup.3 viable cells). The rejection of colon
    cancer isograft was evaluated by the number of tumour-free
      rats after 3, 6 and 13 weeks respectively. The treated rats
      demonstrated.
CLM
      What is claimed is:
      1. A method of treating interferon sensitive diseases,
      comprising the steps of taking a whole blood sample from a human
      or animal patient suffering from such disease, incubating said
      whole blood sample in vitro in the presence of a mitogen to
      produce .gamma.-interferon, subjecting said incubated
      whole blood sample to a separation step so as to produce a blood
      plasma preparation which is free of said mitogen but contains a
      therapeutically effective amount of said produced .gamma.-
    interferon, and re-administering said blood plasma
      preparation to the same patient.
 . . method of claim 1, wherein said incubation of said whole blood
      sample also produces at least one lymphokin other than
    interferon, and wherein said separation step is carried
      out so as to retain at least a major part of said at.
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6. The method of claim 5 wherein the lymphokin other than

interferon is interleukin II.

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L14 ANSWER 19 OF 19 CAPLUS COPYRIGHT 1998 ACS
     1997:414214 CAPLUS
     127:29081
     Flow cytometric pharmacosensitivity assay and method of cancer
     treatment
IN
     Medenica, Rajko D.; Powell, David K.
PΑ
     Medenica, Rajko D., USA
SO
     PCT Int. Appl., 99 pp.
     CODEN: PIXXD2
ΡI
     WO 9719189 A1 970529
    W: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE,
DS
         DK, EE, ES, FI, GB, GE, HU, IL, IS, JP, KE, KG, KP, KR, KZ, LC,
         LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT,
         RO, RU, SD, SE, SG, SI, SK, TJ, TM, TR, TT, UA, UG, UZ, VN, AM,
         AZ, BY, KG, KZ, MD, RU, TJ, TM
     RW: AT, BE, BF, BJ, CF, CG, CH, CI, CM, DE, DK, ES, FI, FR, GA, GB,
         GR, IE, IT, LU, MC, ML, MR, NE, NL, PT, SE, SN, TD, TG
    WO 96-US18543 961112
ΑI
PRAI US 95-559812 951117
DT
     Patent
LΑ
    English
AB
    A method is disclosed for treating cancer with a multidrug
     chemotherapeutic regimen detd. by in vitro pharmacosensitivity
     tests. A cell suspension is prepd. from a tumor specimen obtained
     from the patent. The viable tumor cell count within the cell
     suspension is calcd. The vol. of the cell suspension is then
     adjusted to obtain a base cell concn. by dilg. the cell suspension
    with patient medium in proportion with the viable tumor cell count.
    A sample of the cell suspension is retained as a neg. control
    sample. Drug samples are then prepd., each drug sample contq. a
    mixt. of cell suspension, patient medium, and a drug selected from
    several drugs, wherein each drug sample contains a different drug
    which is added to the drug sample in an aliquot amt. proportional to
    the base cell concn. The drug samples and neg. control sample are
    then incubated. After incubation, the drug samples and neg. control
    sample are stained with a DNA intercalating dye. The cell viability
    in the drug samples and neg. control sample is detd. by use of a
    flow cytometer. The cell viability in the drug samples and neg.
    control sample is compared to det. the pharmacosensitivity of the
    tumor. A multidrug treatment regimen is then administered to the
    patient, wherein the regimen includes the drugs shown to be most
    effective against the tumor in the pharmacosensitivity assay.
    treatment has been shown to be esp. useful in the simultaneous
    treatment of primary tumors and their metastases, esp. when the
    chemotherapeutic regimen is administered locoregionally by
    intra-arterial infusion methods.
    Interferon .tau.
    Interferon .beta.
    RL: BAC (Biological activity or effector, except adverse); THU
    (Therapeutic use); BIOL (Biological study); USES (Uses)
        (1b; flow cytometric pharmacosensitivity assay and method of
       cancer treatment)
    Bladder tumors
    Breast tumors
    Chronic myelogenous leukemia
    Colon tumors
    Liver tumors
    Lung tumors
    Melanoma
    Metastasis (tumor)
    Metastasis to liver
    Myeloid leukemia
    Non-Hodgkin's lymphoma
    Osteosarcoma
```

Ovarian carcinoma

```
Ovarian tumors
     Pancreatic tumors
     Renal cell carcinoma
     Tumors (animal)
        (cells; flow cytometric pharmacosensitivity assay and method of
        cancer treatment)
ΙT
    Antitumor agents
     Bladder carcinoma inhibitors
     Breast tumor inhibitors
     Chronic myelogenous leukemia inhibitors
     Colon tumor inhibitors
     Drug resistance
     Flow cytometry
     Hepatoma inhibitors
     Liver metastasis inhibitors
     Lung tumor inhibitors
     Melanoma inhibitors
     Metastasis inhibitors
     Myeloid leukemia inhibitors
     Ovarian carcinoma inhibitors
     Ovarian tumor inhibitors
        (flow cytometric pharmacosensitivity assay and method of cancer
        treatment)
ΙT
     Hormones (animal), biological studies
     Interferon .alpha.
     Interferon .alpha.2a
     Interferon .alpha.2b
     Interferon .beta.
     Interleukin 2
     Tumor necrosis factors
     RL: BAC (Biological activity or effector, except adverse); THU
     (Therapeutic use); BIOL (Biological study); USES (Uses)
        (flow cytometric pharmacosensitivity assay and method of cancer
        treatment)
     Non-Hodgkin's lymphoma
ΙT
     Osteosarcoma
     Pancreatic tumors
     Renal cell carcinoma
        (inhibitors; flow cytometric pharmacosensitivity assay and method
        of cancer treatment)
ΙT
     Antitumor agents
        (osteosarcoma; flow cytometric pharmacosensitivity
        assay and method of cancer treatment)
ΙT
    Metastasis inhibitors
        (renal cell cancer, to liver; flow cytometric
        pharmacosensitivity assay and method of cancer treatment)
IT
     Interferons
     RL: BAC (Biological activity or effector, except adverse); THU
     (Therapeutic use); BIOL (Biological study); USES (Uses)
        (.pi.; flow cytometric pharmacosensitivity assay and method of
        cancer treatment)
```